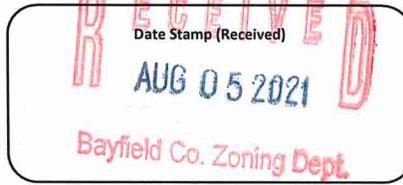


SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR SIGN
 BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0263
Date:	8-12-21
Amount Paid:	\$175 450 8-10-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. **DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.**

Property Owner(s) Name: <i>TOWN OF CABLER</i>	Mailing Address: <i>P.O. BOX 476</i>	City/State/Zip: <i>CABLER, WI 54821</i>	Phone: <i>715 798-4440</i>
Sign Owner(s) Name: <i>CABLER AREA CHAMBER</i>	Mailing Address: <i>PO BOX 217</i>	City/State/Zip: <i>CABLER, WI 54821</i>	Phone: <i>800-533-7454</i>
Address of Property: <i>13380 County Hwy M</i>	City/State/Zip: <i>CABLER, WI 54821</i>		
Contractor:	Contractor Phone:	Address:	
Authorized Agent: (Person Signing Application on behalf of Owner(s)) <i>BOB HASTROSKY</i>	Agent Phone: <i>715-580-0157</i>	Agent Mailing Address (include City/State/Zip): <i>14295 MCNAUGHT RD. CABLER, WI 54821</i>	Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID: (4 or 5 digits) <i>16786</i>	Recorded Document: (i.e. Property Ownership) Volume <i>517</i> Page(s) <i>196</i>
<u> </u> 1/4, <u> </u> 1/4	Gov't Lot	Lot(s)	CSM
			Vol & Page
		Lot(s) No. <i>2</i>	Block(s) No. <i>2</i>
Section <i>18</i> , Township <i>43</i> N, Range <i>7</i> W		Town of: <i>CABLER</i>	
		Lot Size	Acreage <i>.240</i>

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion <small>* include donated time & material</small>	Project <small>(What are you applying for)</small>	Type	Length	Width	Height	Located in Town of Bayfield
\$ <i>15,000</i>	<input checked="" type="checkbox"/> On-Premise	<input type="checkbox"/> New				<input type="checkbox"/> Yes <input type="checkbox"/> TBA is required <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Off-Premise	<input checked="" type="checkbox"/> Replacement				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Multi-Tenant			

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ Date _____
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Applicant(s): _____ Date _____
(If you are applying for an Off-premise sign, the property owners must also sign this form)

Authorized Agent: *[Signature]* Date *8/8/2021*
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit *14295 MCNAUGHT RD, CABLER, WI 54821*
 Attach Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

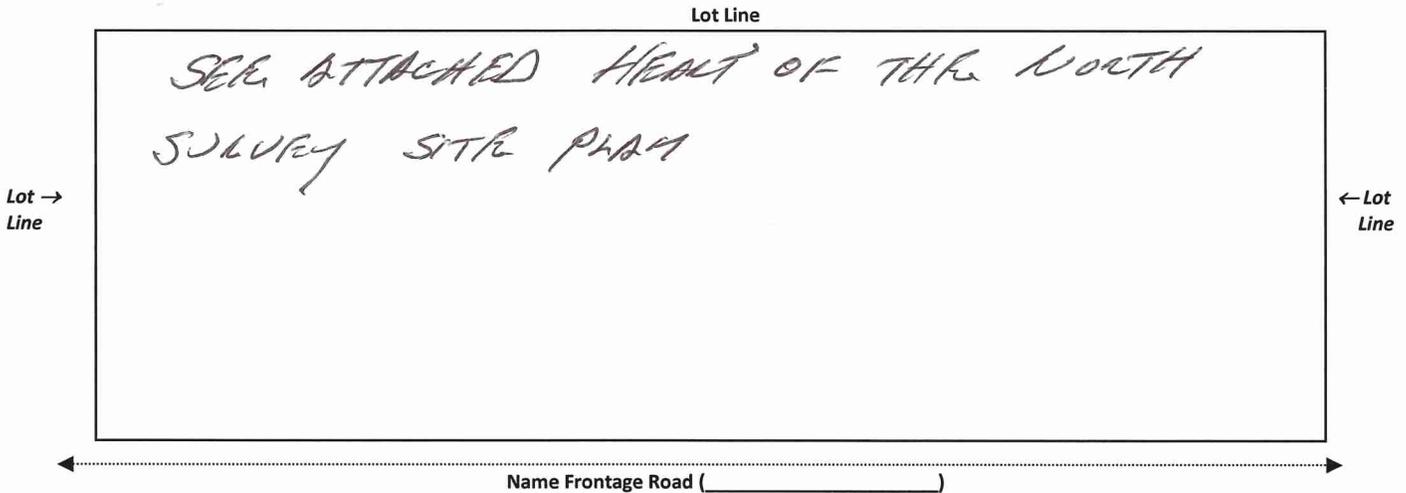
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. The local Town, Village, City, State or Federal agencies may also require permits.

1. Name and use frontage road as a guideline, and indicate North (N) on plot plan

2. Show the sign location

3. Show dimensions in feet on the following:

IMPORTANT
Detailed Plot Plan is Necessary



Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	71.2 Feet	Setback from the North Lot Line	75 Feet
Setback from the Established Right-of-Way	5.2 Feet	Setback from the South Lot Line	5.2 Feet
Setback from Lake, River, Stream or Pond	_____ Feet	Setback from the West Lot Line	60 Feet
Setback from Other Sign(s)	_____ Feet	Setback from the East Lot Line	80 Feet

Sign Plan
(Fill in Information Desired on Sign)

Issuance Information (County Use Only)	Permit Number: 21-0263	Permit Date: 8-12-21	
Permit Denied (Date):	Reason for Denial:		
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input type="checkbox"/> No Case #:	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		
Was Parcel Legally Created <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____ Was Proposed Building Site Delineated <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____	Were Property Lines Represented by Owner <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____ Was Property Surveyed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____		
Inspection Record:			Zoning District (C) Lakes Classification (N/A)
Date of Inspection: 8/6/21	Inspected by: [Signature]	Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)			
Abide by STATE & County use of LED Signage			Date of Approval: 9/12/21
Signature of Inspector: [Signature]			

TOWN BOARD RECOMMENDATION - - (CLASS A - SPECIAL USE)

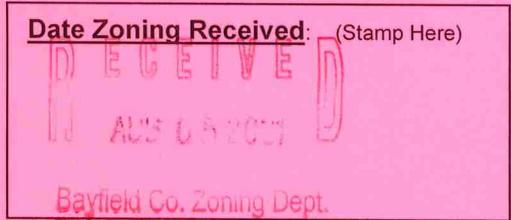
Residence in Ag-1 or F-1; Shoreland Grading; Short-Term Rental (1 unit); Signage; RV Ext

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Website:
www.bayfieldcounty.org/147

Date Zoning Received: (Stamp Here)



Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 1/2 x 14) [front/back]. This is a Class A special use request. **Note:** The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. *Ask Town if you should be present at their meeting(s).*

Property Owner TOWN OF CABLE (CHAIRMAN OF COMMERCIAL BUILDING) **Contractor** _____
Property Address 13380 COUNTY HWY 41 **Authorized Agent** MARK BASTOSKY
CABLE, WI 54821 **Agent's Telephone** 715-580-0157
Telephone 715-798-4440 **Written Authorization Attached:** Yes (X) No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)
 _____ 1/4 of _____ 1/4, Section 18, Township 48 N., Range 27 W. Town of CABLE
E 5 1/2 OF LOT 2
Govt. Lot _____ **Lot** 1 **Block** 2 **Subdivision** _____ **CSM#** _____
Volume _____ **Page** _____ **of Deeds** **Tax I.D.#** 10786 **Acreage** .240

Additional Legal Description: _____
Applicant: (State what you are asking for) **Zoning District:** C **Lakes Classification** _____
TO ALLOW ONE ON PREMISE 32 SQ FT. LED
(LIGHT-EMITTING DIODE) SIGN ON EXISTING
SIGN STRUCTURE SEE ATTACHED

We, the Town Board, **TOWN OF** CABLE, do hereby recommend to

Table **Approval** **Disapproval**

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: **Yes** **No**

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

- ** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:
1. The Tabled, Approval or Disapproval box checked
 2. The Town's reasoning for the tabling, approval or disapproval
 3. The form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Signed: MALCOLM HARRIS
Chairman: Mark No
Supervisor: Kyle Weber
Supervisor: Tony Mon...
Supervisor: David P...
Clerk: Kelly RAUCH
Date: 7/21/2021

**TOWN OF CABLE PLAN COMMISSION
REFERRAL MEMORANDUM**

DATE: July 10, 2021

TO: Kelly Rausch, Town of Cable Clerk

FROM: Jeannie Dixon, Plan Commission Secretary *JJD*

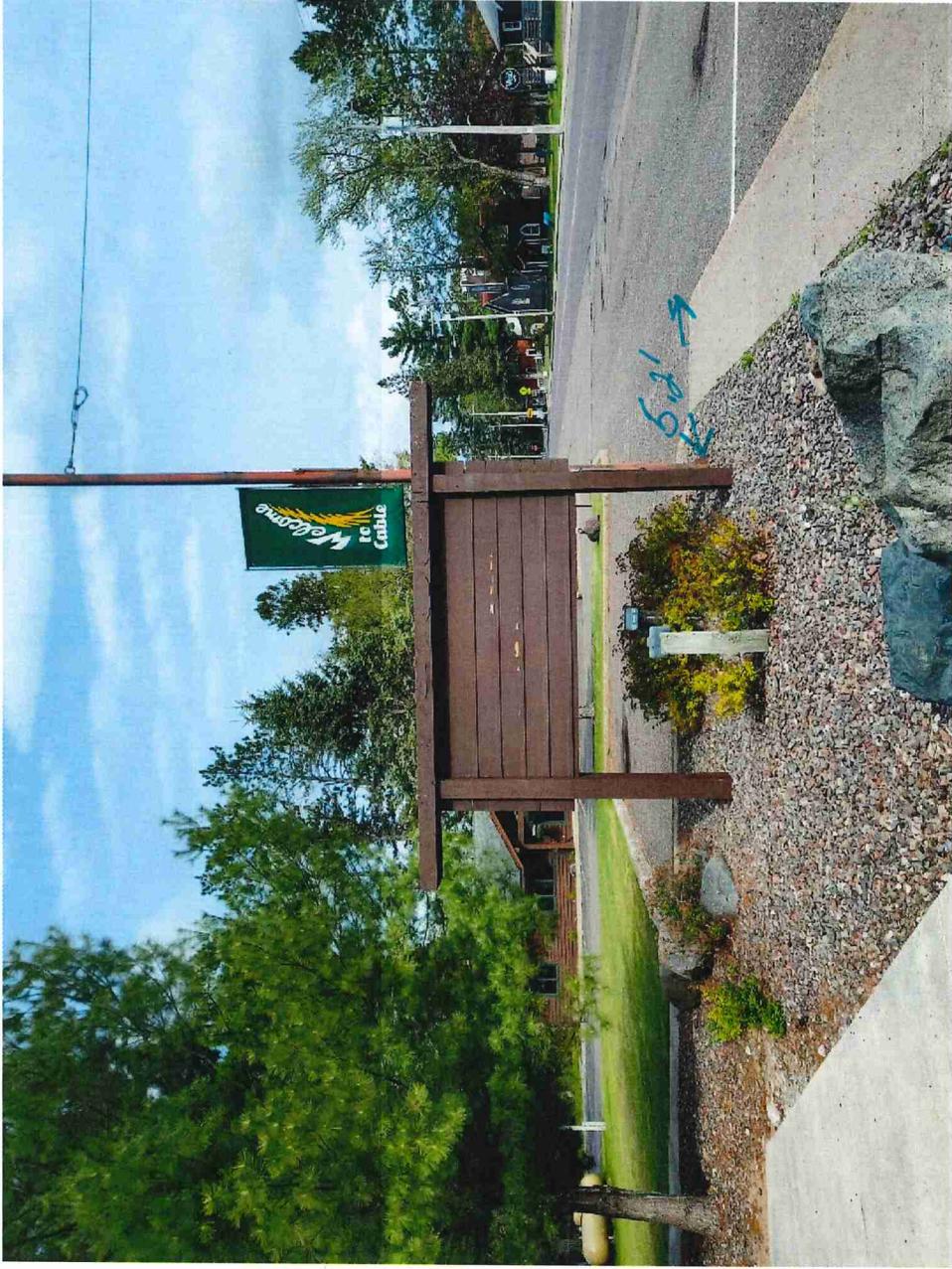
RE: Town of Cable, Owner
Karl Kastrosky, Agent
Location: 13380 County Hwy M, Cable
Chamber of Commerce Building

PROPOSAL: Class A Special Use Permit Request to allow a 32 sq. ft.
LED sign on existing sign structure

ATTACHMENTS: Permit application and related documents

RECOMMENDATION: APPROVAL

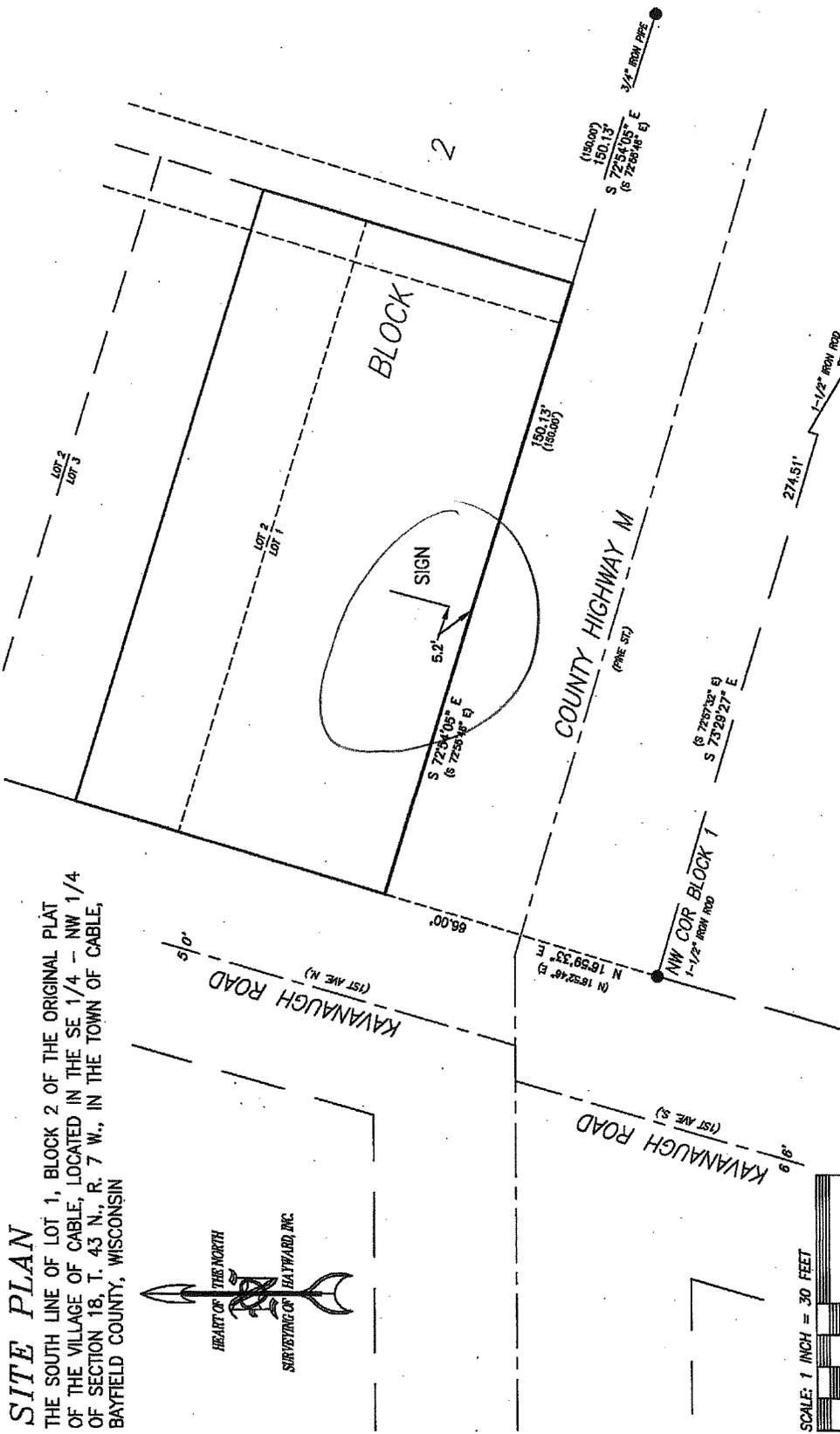
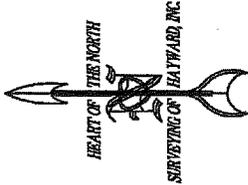
By approved motion at the July 6, 2021 meeting, the Town of Cable Plan Commission recommends that the Class A Special Use Permit Request to erect a 32 sq.ft. LED sign be forwarded to the Cable Town Board for approval. Specifically, the motion states in part "...to recommend to the Town Board that the Town of Cable allow the Chamber of Commerce to erect a new LED sign on the existing sign structure located at 13380 County Hwy M. The new sign meets all Bayfield County sign ordinance requirements, will enhance economic development in our community and encourages and improves communication within the Town."



New FACE ONLY (COVER SLOPED)

SITE PLAN

THE SOUTH LINE OF LOT 1, BLOCK 2 OF THE ORIGINAL PLAT OF THE VILLAGE OF CABLE, LOCATED IN THE SE 1/4 - NW 1/4 OF SECTION 18, T. 43 N., R. 7 W., IN THE TOWN OF CABLE, BAYFIELD COUNTY, WISCONSIN



SCALE: 1 INCH = 30 FEET



LEGEND

- MONUMENT, AS NOTED, FOUND
- () RECORDED DATA

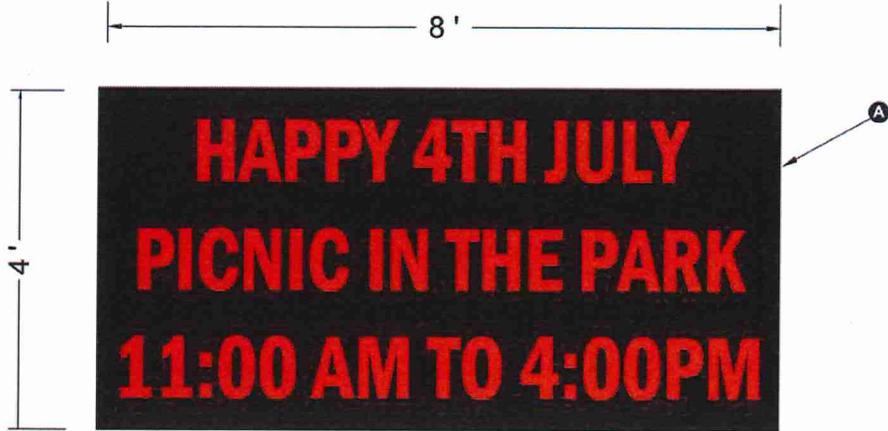
CLIENT: KARL KASTROSKY
JOB NO. H21
SCALE: 1" = 30'

HEART OF THE NORTH
SURVEYING OF HAYWARD, INC.

PH: 715/634-2442
FAX: 715/634-6444
10350N DUFFY ROAD
HAYWARD, WI 58043
WWW.HONORSURVING.COM



GROUND SIGN.



SPECIFICATION NOTES
A ADD NEW EMC UNIT TO EXISTING SIGN.

EXISTING SIGN.



SIGN WITH NEW EMC UNIT.

Approved by: _____ Date: _____ Landlord: _____ Date: _____

This artwork is copyrighted and may not be otherwise used without permission. It is the property of La Crosse Sign Co, inc. and must be returned to them.

DESIGN

SALES

FILE

COLOR KEY

*COLORS ON SKETCH ARE ONLY A REPRESENTATION, ACTUAL COLOR OF FINISHED PRODUCT MAY DIFFER



ONALASKA | MADISON | EAU CLAIRE

1450 Oak Forest Drive • Onalaska, WI 54650 • 608-781-1450
 2242 Mustang Way • Madison, WI 53718 • 608-222-5353
 2502 Melby Street • Eau Claire, WI 54703 • 715-835-6189

Drawing by: **MICHAEL V JOLIN**
 Sign Type: **GROUND SIGN.**
 Date Created: **3/30/2021**
 Last Modified: **3/30/2021**
 Scale:

Job Name: **CasRocTenantSign**
 Job **13380 COUNTY HWY M** Job File Location:
 Address: **CABLE WI, 54821**
 Sales Consultant: **JOEL HOUSE**
 Job Number: **#111949**

Article E: Signs

Sec. 13-1-80 Sign Regulation Purposes.

The intent of the Bayfield County sign ordinance is to balance the need to preserve the rural character and natural scenic beauty of the area with the equally important need to support the county's economic base

Sec. 13-1-81 General Restrictions.

No outdoor advertising sign visible to the traveling public shall be erected, structurally altered, or maintained except as provided in this Article.

Sec. 13-1-82 Number and Size of Permitted Signs.

Each business shall be permitted signage as follows:

- (a) On-premise signage. Each business shall be permitted on-premise signage as follows:
- (1) **One (1) sign** with area not to exceed 96 square feet and up to two (2) additional signs with area of each sign not to exceed 50 square feet; or,
 - (2) **Four (4) signs** with area of each sign not to exceed 50 square feet.
 - (3) **Multi-tenant signage.** Each business park or parcel with a structure designed for multi tenants shall be permitted to erect one (1) multi-tenant sign not to exceed 14 feet in height and include a maximum of one (1) panel for each business with an area that is not to exceed 16 square feet. Each panel included in the multi-tenant sign shall count as one 50 square foot on-premise sign as calculated in this section. (A)12/10/2013)
 - (4) **Notwithstanding Sec. 13-1-87(a), if a business is located in the Unincorporated Village Overlay District (UVOD) as defined in Sec. 13-1-61(m), one of the on-premise signs allowed under Sec. 13-1-82(a) may be a light-emitting diode (LED) sign not exceeding 32 square feet.** (©)5/27/2014)
- (b) Off-premise signage. Each business may include up to two (2) signs off the premise with area of each sign not to exceed 50 square feet. (A)12/15/2009)

Note: for purposes of this Section, two back-to-back faces on one sign structure shall constitute one (1) sign.

Sec. 13-1-83 Distance.

Off premise signs visible from the same road and located on the same side thereof, including signs advertising different businesses, products, etc., shall have a minimum



Karl Kastrosky
Land Development & Zoning Consultant

14295 McNaught Rd. Cable, WI 54821

715-580-0157

Kastrosky821@gmail.com

To Whom it may concern,

I hereby authorize **Karl Kastrosky** to act as my agent to procure permits and

access information pertaining to my property at 13380 County Hwy M

in the Town of Cable County of Bayfield.

Sally Pauck
Signature clerk

6/28/21
Date

My contact information is:

Address: _____

Phone: 715-798-4440

Email: _____

Real Estate Bayfield County Property Listing

Today's Date: 6/28/2021

Property Status: **Current**

Created On: 3/15/2006 1:15:10 PM

 **Description** Updated: 3/5/2019

Tax ID: 10786
PIN: 04-012-2-43-07-18-2 00-307-06000
 Legacy PIN: 012126107000
 Map ID:
 Municipality: (012) TOWN OF CABLE
 STR: S18 T43N R07W
 Description: VILLAGE OF CABLE LOT 1 & S 1/2 OF LOT 2 BLOCK 2 112V
 Recorded Acres: 0.240
 Calculated Acres: 0.258
 Lottery Claims: 0
 First Dollar: No
 Zoning: (C) Commercial
 ESN: 108

 **Tax Districts** Updated: 3/15/2006

1 STATE
 04 COUNTY
 012 TOWN OF CABLE
 041491 SCHL-DRUMMOND
 001700 TECHNICAL COLLEGE
 047110 CABLE SANITARY DISTRICT #1

 **Recorded Documents** Updated: 3/15/2006**CONVERSION**

Date Recorded: 517-186

 **Ownership** Updated: 5/10/2011**TOWN OF CABLE** CABLE WI**Billing Address:**

TOWN OF CABLE
 PO BOX 476
 CABLE WI 54821

Mailing Address:

TOWN OF CABLE
 PO BOX 476
 CABLE WI 54821

 **Site Address** * indicates Private Road

13380 COUNTY HWY M CABLE 54821

 **Property Assessment** Updated: 3/15/2006**2021 Assessment Detail**

Code	Acres	Land	Imp.
X4-EXEMPT OTHER	0.240	0	0

2-Year Comparison

	2020	2021	Change
Land:	0	0	0.0%
Improved:	0	0	0.0%
Total:	0	0	0.0%

 **Property History**

N/A

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY –
SIGN – **X**
SPECIAL – **Class A**
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0263** Issued To: **Town of Cable / Karl Kastrosky, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **18** Township **43** N. Range **7** W. Town of **Cable**

S $\frac{1}{2}$ of Lot 2

Gov't Lot Lot **1** Block **2** Subdivision **Village of Cable** CSM#

For: **Commercial Other: [On - Premise; Sign (8' x 4' x 7' High) = 32 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Abide by State and Country use of LED signage.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

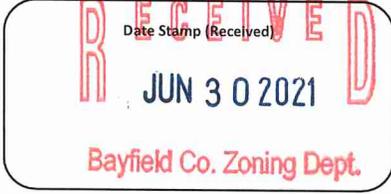
Authorized Issuing Official

August 12, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0265
Date:	8-12-21
Amount Paid:	\$450 \$175 7-1-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input checked="" type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER			
Owner's Name: Michael Leopold				Mailing Address: 1609 Watson Ave				City/State/Zip: St. Paul, MN 55116				Telephone:					
Address of Property: 44835 W Cable Lk. Rd				City/State/Zip: Cable, WI 54821				Cell Phone: 651-788-1203				Plumber Phone: 715-699-0945					
Contractor: Morton Buildings				Contractor Phone: 218-244-4508				Plumber: Visocky Plumbing				Agent Mailing Address (include City/State/Zip): Brent Walstad Hayward 1109 W Allan Rd WI 54813					
Authorized Agent: (Person Signing Application on behalf of Owner(s))				Agent Phone:				Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
PROJECT LOCATION		Legal Description: (Use Tax Statement)						Tax ID# 37475		Recorded Document: (Showing Ownership) 2019 R 571039							
NW 1/4, NW 1/4 S 1/4 of 660 LOT 7		Gov't Lot 7		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #		Subdivision:	
Section 12		Township T. 43N		N, Range 8		W		Town of: Cable		Lot Size 1320 x 330		Acreage 20.2					

<input checked="" type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage? If yes---continue →	Distance Structure is from Shoreline : 200 feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 150,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type:	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)				<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property			Use	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>			Year Round	<input type="checkbox"/> Compost Toilet	
				<input type="checkbox"/> None	<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 30'	Width: 24'	Height: 10' / 15' 10" to Peak

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	(X)	
	<input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	(24 x 30)	720
	<input checked="" type="checkbox"/> with Loft	(X)	
	<input checked="" type="checkbox"/> with a Porch	(8' x 30')	240
	<input checked="" type="checkbox"/> with (2nd) Porch	(8' x 15')	120
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> with a Deck	(X)	
	<input type="checkbox"/> with (2nd) Deck	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> with Attached Garage	(X)	
	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/> Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/> Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/> Accessory Building (explain) _____	(X)	
	<input type="checkbox"/> Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/> Special Use: (explain) _____	(X)	
<input type="checkbox"/> Conditional Use: (explain) _____	(X)		
<input type="checkbox"/> Other: (explain) _____	(X)		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Michael Leopold Date June 29, 2021
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: _____ Date _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit _____
 Attach Copy of Tax Statement
 Original Application MUST be submitted
 If you recently purchased the property send your Recorded Deed

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	500 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	100 Feet		
Setback from the South Lot Line	220 Feet	Setback from Wetland	200 Feet
Setback from the West Lot Line	820 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	500 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s): All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0265		Permit Date: 8-12-21		
Is Parcel a Sub-Standard Lot	<input checked="" type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:				Zoning District (F-1)
				Lakes Classification (NA)
Date of Inspection:	8/6/21	Inspected by:	Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.)				
- Build as proposed - Get Required UDC inspections				
Signature of Inspector: [Signature]				Date of Approval: 8/12/21
Hold For Sanitary:	Hold For TBA:	Hold For Affidavit:	Hold For Fees:	

TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

When **Town Board** has completed this form, please mail to:

Bayfield County Planning and Zoning Department
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Website:
www.bayfieldcounty.org/147



Date Zoning Received: (Stamp Here)

RECEIVED

JUL 29 2021

Bayfield Co.
 Planning and Zoning Agency

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 1/2 x 14) [front/back]. This is a Class A special use request. **Note:** The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. **Ask Town if you should be present at their meeting(s).**

Property Owner Michael Leipold / Estella Daniels Contractor Morton Buildings
 Property Address 44835 W Cable Rd Authorized Agent Brent Walstad
Cable, WI 54821 Agent's Telephone 715-218-244-4508
 Telephone 651-788-1203 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)
NW 1/4 of NW 1/4, Section 12, Township 43 N., Range 8 W. Town of Cable

Govt. Lot 7 Lot Block Subdivision CSM# 1971

Volume Page of Deeds Tax I.D.# Parcel ID 04-012-2-43-08-12 Acreage 20

Additional Legal Description: \$37475 - 205-007-1000

Applicant: (State what you are asking for) We are seeking approval for the construction of a 1 bedroom, 1 bathroom 720 sq ft residence on the aforementioned property.
 Zoning District: Lakes Classification

We, the Town Board, TOWN OF CABLE, do hereby recommend to

Table Approval Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: Yes No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)
meets our Comprehensive Plan - approved

- ** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:
1. The Tabled, Approval or Disapproval box checked
 2. The Town's reasoning for the tabling, approval or disapproval
 3. The form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Revised: November 2017

Signed: Malcolm Haac
 Chairman:
 Supervisor: Kyle [unclear]
 Supervisor: Tony [unclear]
 Supervisor: Jim [unclear]
 Clerk: Kelly Raueh Kelly Raueh
 Date: 7/21/2021

**TOWN OF CABLE PLAN COMMISSION
REFERRAL MEMORANDUM**

DATE: July 10, 2021

TO: Kelly Rausch, Town of Cable Clerk

FROM: Jeannie Dixon, Plan Commission Secretary 

RE: Michael Leipold/Estella Daniels, Owner
Location: 44835 W Cable Lake Rd, Cable

PROPOSAL: Class A Special Use Permit Request to construct a 720 sq ft residence in a forestry zone

ATTACHMENTS: Permit application and related documents

RECOMMENDATION: APPROVAL

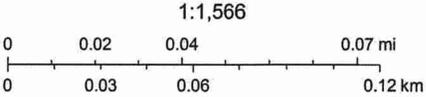
By approved motion at the July 6, 2021 meeting, the Town of Cable Plan Commission recommends the approval of the Class A Special Use Permit Request to construct a 720 sq.ft. residence at 44835 W Cable Lake Rd. Specifically, the motion states in part "...to recommend to the Town Board that the Class A Special Use permit for property located at 44835 W Cable Lake Rd be approved in order to allow the property owners to construct a 720 sq.ft. residential structure in a forestry zone. There appears to be no environmental impact to the site, wetland setback requirements are met, the existing driveway meets Town standards and the project meets Forestry 1 zoning requirements."

Bayfield County, WI



7/6/2021, 8:24:23 AM

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Bayfield County, Bayfield County Land Records

Tracy Pooler

From: Tracy Pooler
Sent: Friday, July 9, 2021 8:31 AM
To: Tracy Pooler
Subject: RE: 44835 W. Cable Lk Rd

Michael,

I was at your site yesterday the location looked fine.

I have a couple needs and questions.

I do not see a septic application for the dwelling yet. Is one in process?

What is the use of the current small structure on the land?

Tracy

From: Tracy Pooler
Sent: Friday, July 2, 2021 9:17 AM
To: Michael Leipold <michaeljamesleipold@gmail.com>
Subject: RE: 44835 W. Cable Lk Rd

Have not made it out to the site yet. It just got entered into the system yesterday

From: Michael Leipold <michaeljamesleipold@gmail.com>
Sent: Thursday, July 1, 2021 11:16 AM
To: Tracy Pooler <tracy.pooler@bayfieldcounty.wi.gov>
Subject: 44835 W. Cable Lk Rd

Hi Tracy,

Did everything check out ok? I hope that my staking was adequate. Thanks for your help.

Mike Leipold

Real Estate Bayfield County Property Listing

Today's Date: 6/29/2021

Property Status: **Current**

Created On: 2/7/2017 3:35:51 PM

Description Updated: 12/5/2017

Tax ID: 37475
PIN: 04-012-2-43-08-12-2 05-007-10000
 Legacy PIN:
 Map ID:
 Municipality: (012) TOWN OF CABLE
 STR: S12 T43N R08W
 Description: S 1/2 GOVT LOT 7 & NW NW ~~LESS CSM~~
 #1971 & ~~LESS~~ THAT PART DESC IN
 DOC 2017R-571039
 Recorded Acres: 0.000
 Calculated Acres: 0.000
 Lottery Claims: 0
 First Dollar: No
 ESN: 108

Ownership Updated: 12/5/2017

ESTELLA M DANIELS ST PAUL MN
MICHAEL J LEIPOLD ST PAUL MN

Billing Address:
DANIELS, ESTELLA M & LEIPOLD, MICHAEL J
 1609 WATSON AVE
 ST PAUL MN 55116

Mailing Address:
DANIELS, ESTELLA M & LEIPOLD, MICHAEL J
 1609 WATSON AVE
 ST PAUL MN 55116

Site Address * indicates Private Road
 44835 W CABLE LAKE RD CABLE 54821

Property Assessment Updated: 6/17/2020

2021 Assessment Detail

Code	Acres	Land	Imp.
G5-UNDEVELOPED	6.000	2,100	0
G6-PRODUCTIVE FOREST	14.000	37,400	0

2-Year Comparison

	2020	2021	Change
Land:	39,500	39,500	0.0%
Improved:	0	0	0.0%
Total:	39,500	39,500	0.0%

Tax Districts Updated: 2/7/2017

1 STATE
 04 COUNTY
 012 TOWN OF CABLE
 041491 SCHL-DRUMMOND
 001700 TECHNICAL COLLEGE

Recorded Documents Updated: 2/7/2017

- WARRANTY DEED**
 Date Recorded: 11/30/2017 **2017R-571039**
- WARRANTY DEED**
 Date Recorded: 10/4/2016 2016R-565568

Property History

Parent Properties Tax ID
[04-012-2-43-08-12-2 01-000-30000](#) **37439**

HISTORY [Expand All History](#) White=Current Parcels Pink=Retired Parcels

- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34992 Pin: 04-012-2-43-08-12-1 00-666-13000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34991 Pin: 04-012-2-43-08-12-1 00-666-12000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34990 Pin: 04-012-2-43-08-12-1 00-666-11000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34989 Pin: 04-012-2-43-08-12-1 00-666-10000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34988 Pin: 04-012-2-43-08-12-1 00-666-09000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34987 Pin: 04-012-2-43-08-12-1 00-666-08000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34986 Pin: 04-012-2-43-08-12-1 00-666-07000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34985 Pin: 04-012-2-43-08-12-1 00-666-06000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34984 Pin: 04-012-2-43-08-12-1 00-666-05000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34983 Pin: 04-012-2-43-08-12-1 00-666-04000
- Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000**
- Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000**
Tax ID: 34982 Pin: 04-012-2-43-08-12-1 00-666-03000

- [**+** Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000](#)
- [**+** Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000](#)
- [**+** Tax ID: 34981 Pin: 04-012-2-43-08-12-1 00-666-02000](#)
- [**+** Tax ID: 9364 Pin: 04-012-2-43-08-12-2 02-000-20000 Leg. Pin: 012110207000](#)
- [**+** Tax ID: 9355 Pin: 04-012-2-43-08-12-1 05-007-20000 Leg. Pin: 012110108000](#)
- [**+** Tax ID: 34980 Pin: 04-012-2-43-08-12-1 00-666-01000](#)
- [**+** Tax ID: 37433 Pin: 04-012-2-43-08-12-1 05-007-13000](#)
- [**+** Tax ID: 37439 Pin: 04-012-2-43-08-12-2 01-000-30000](#)

37475 This Parcel  Parents  Children

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **21-123S**
SIGN –
SPECIAL – **Class A**
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0265** Issued To: **Estella Daniels & Michael Leipold**

S ½ of the

Location: **NW ¼ of NW ¼ Section 12 Township 43 N. Range 8 W. Town of Cable**

Gov't Lot **7** Lot Block Subdivision CSM#

For: **Residential Use: [1- Story; Residence (24' x 30') = 720 sq. ft.; Porch #1 (8' x 30') = 240 sq. ft.; Porch #2 (8' x 15') = 120 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as proposed. Get required UDC inspections.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

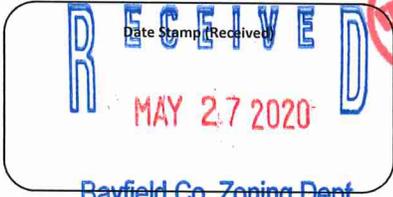
Authorized Issuing Official

August 12, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0268
Date:	8-17-21
Amount Paid:	\$250 8-17-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →										<input type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: Cable Chamber of Commerce			Mailing Address: P.O. Box 217			City/State/Zip: Cable, WI 54821			Telephone: 715 798 3858							
Address of Property: 13580 Cty Hwy M			City/State/Zip: Cable, WI 54821						Cell Phone: 715 500-0808							
Contractor: Ken Dumont			Contractor Phone: 715-671-3102			Plumber: N/A			Plumber Phone:							
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Heather Ludzack			Agent Phone: 715-500-0808			Agent Mailing Address (include City/State/Zip): P.O. Box 116 Cable, WI 54821			Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No							
PROJECT LOCATION		Legal Description: (Use Tax Statement)				Tax ID#		Recorded Document: (Showing Ownership) 517 186								
1/4, 1/4		Gov't Lot	Lot(s)	CSM	Vol & Page	CSM Doc #	Lot(s) #	Block #	Subdivision: Village of Cable							
Section 18		Township 43 N, Range 7 W		Town of: Cable		Lot Size		Acreage 0.24								

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? <u>N</u> If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage <u>N</u> If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type:	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Town of Cable	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)				<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input checked="" type="checkbox"/> Run a Business on Property				<input type="checkbox"/> Portable (w/service contract)	
				<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> Compost Toilet	
				<input type="checkbox"/> None	<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length: 22' FT	Width: 16' FT	Height: 21' in
Proposed Construction: (overall dimensions)	Length: 39' FT	Width: 5 FT	Height: 21' in

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	(X)	
	with Loft	(X)	
	with a Porch	(X)	
	with (2 nd) Porch	(X)	
<input type="checkbox"/> Commercial Use	with a Deck	(X)	
	with (2 nd) Deck	(X)	
<input checked="" type="checkbox"/> Municipal Use	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/> Mobile Home (manufactured date)	(X)	
	<input checked="" type="checkbox"/> Addition/Alteration (explain) Handy cap Ramp	(39 X 5)	195
	<input type="checkbox"/> Accessory Building (explain)	(X)	
	<input type="checkbox"/> Accessory Building Addition/Alteration (explain)	(X)	
	<input checked="" type="checkbox"/> Special Use: (explain) Chamber of Commerce	(39 X 5)	
	<input type="checkbox"/> Conditional Use: (explain)	(X)	
<input type="checkbox"/> Other: (explain)	(X)		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Cable Area Chamber of Commerce Date: 5/21/2020
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Heather Ludzack Date: 5/21/2020
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: P.O. Box 217 Cable, WI 54821
 Attach Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed

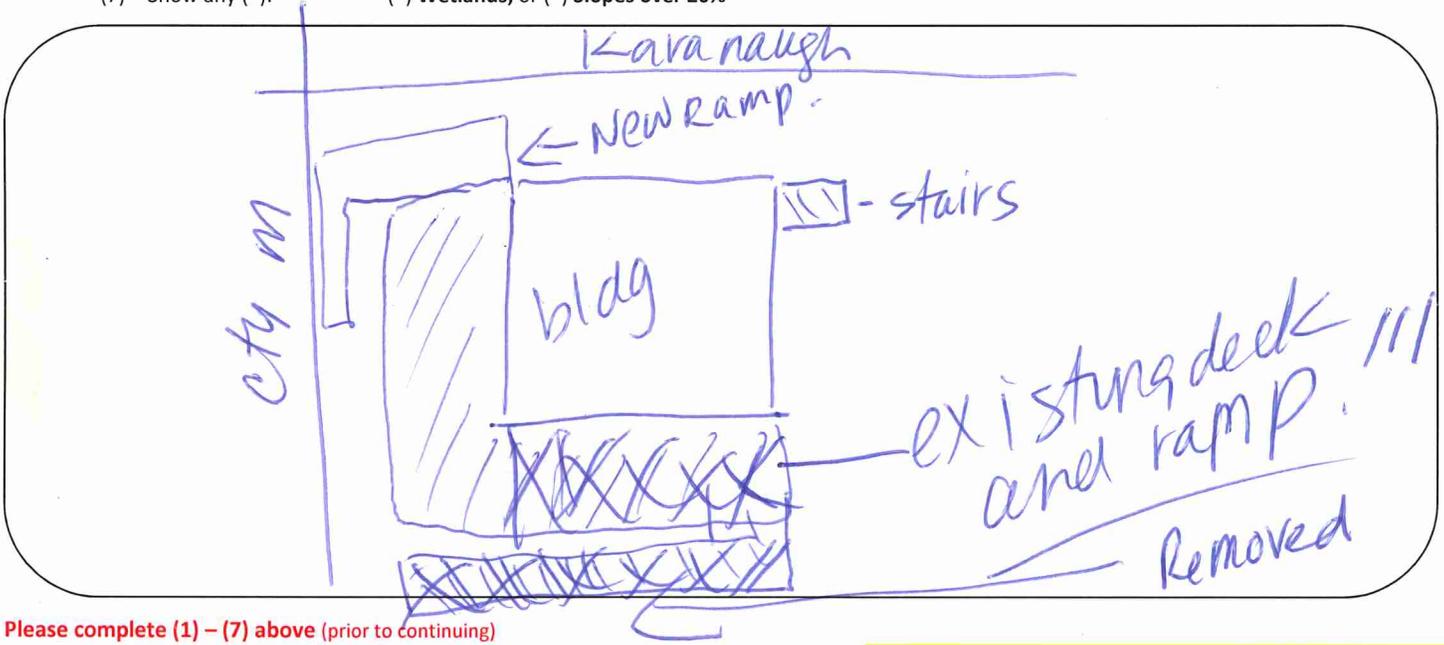
Original Application MUST be submitted

MISSING MAPS TAX STATEMENT + COST OF CONSTRUCTION

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road		Setback from the Lake (ordinary high-water mark)	
Setback from the Established Right-of-Way	0	Setback from the River, Stream, Creek	
		Setback from the Bank or Bluff	
Setback from the North Lot Line	5		
Setback from the South Lot Line	30	Setback from Wetland	
Setback from the West Lot Line	0	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	50	Elevation of Floodplain	
Setback to Septic Tank or Holding Tank		Setback to Well	
Setback to Drain Field			
Setback to Privy (Portable, Composting)			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0067		Permit Date: 8-17-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ATF	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record: 8/8/21 TOWN ORD 10 setback for the ramp			Zoning District (C) Lakes Classification (NA)	
Date of Inspection: 8/6/21	Inspected by: [Signature]		Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.) - Get Required UDC Inspections - IF ADA Access is not needed Return structure to legal setbacks				
Signature of Inspector: [Signature]			Date of Approval: 8/12/21	
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>



Karl Kastrosky
Land Development & Zoning Consultant

14295 McNaught Rd. Cable, WI 54821

715-580-0157

Kastrosky821@gmail.com

To Whom it may concern,

I hereby authorize **Karl Kastrosky** to act as my agent to procure permits and

access information pertaining to my property at

13880 County Hwy M

in the Town of

Cable

County of

Bayfield

Signature

[Handwritten Signature]

Date

4/20/21

My contact information is:

Address:

13380 County Hwy M

Phone:

715-798-3833 (715-580-0808)

Email:

chamberdirector@Cable4Fun.com



Town of Cable
P.O. Box 476
Cable, WI 54821
715-798-4440
admin@townofcable.com

RECEIVED
JUN 10 2021
Bayfield Co. Zoning Dept.

June 8, 2021

Bayfield County Zoning
117 E 5th St.
Washburn, WI 54891

RE: ADA Ramp at Cable Chamber

To whom it may concern;

The Town Board of Cable, does hereby give notice of acceptance to the (0) zero-foot setback for the purpose of the ADA accessibility ramp.

Sincerely;

A handwritten signature in black ink, appearing to read "Malcolm Haag", written in a cursive style.

Malcolm Haag
Town of Cable Chairman.
Malcolm.Haag@TownOfCable.com



Cable Drummond Grand View Namakapon

May 18, 2020

Dear Bayfield County Zoning,

Enclosed is the permit for our change to the Deck at the Cable Chamber of Commerce.

Our deck had needed to be replaced for the last 10 years and was over 20 years old. It had become a hazard to visitors and somewhat of an eyesore.

The existing wheelchair ramp had run under the eave of the south facing roof. When the ice and snow melted from the roof, it dripped, and refroze creating a berm directly down the middle of the handicapped accessible entrance, making it nearly impossible to pass, or even remove once it refroze. When the snow would slide off the roof, it would completely block the entrance, and was often too heavy to shovel.

In addition, the original ramp made it so that someone with a disability could only enter our building by going around the side and entering through a different door. I do not like anyone needing to use a separate entrance just because of a disability. I asked the lumber yard to sketch out a plan moving the existing ramp to the opposite side of the building where there were no rooflines interfering with the ramp. The new ramp reduced the original footprint by several square feet and made it so that all our visitors can use the same entrance without being sent around the side or back of the building.

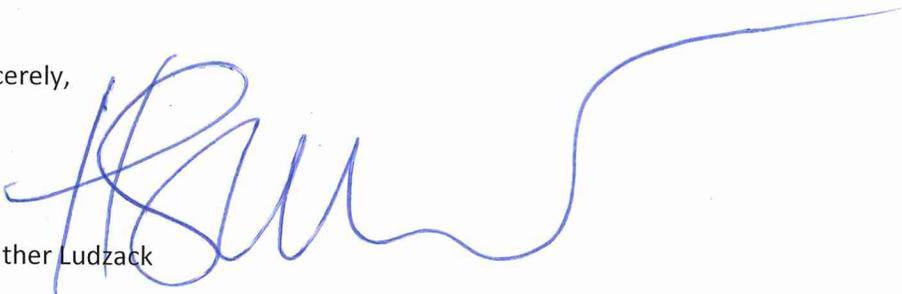
I did not think a permit would be needed if the original footprint were not exceeded, and was actually decreasing, and did not realize the flipping of the ramp would be an issue. I apologize for my misunderstanding.

I appreciate your consideration after the fact of approving this change.

Please let me know if I can provide any information for you, or if you have any questions.

I can be reached at 715-580-0808. Or at the Chamber of Commerce 715-798-3833.

Sincerely,



Heather Ludzack

Vice President & Interim Director

Cable Area Chamber of Commerce

Town, City, Village, State or Federal
Permits May Also Be Required

After-the Fact

LAND USE – **X**
SANITARY – **City**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0268** Issued To: **Cable Area Chamber of Commerce / Karl Kastrosky, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **18** Township **43** N. Range **7** W. Town of **Cable**

Gov't Lot Lot **1** Block **2** Subdivision **Village of Cable** CSM#

For: **Commercial Principal Building: [1- Story; Handicap Ramp (39' x 5') = 195 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): **Get required UDC inspections. If ADA access is not needed, return structure to legal setbacks.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

August 17, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 Date Stamp (Received)
 APR 22 2021
 Bayfield Co. Zoning Dept.

Permit #:	21-0269
Date:	8-17-21
Amount Paid:	\$175 4-26-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input checked="" type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: JANIE KLIMA		Mailing Address: SAM		City/State/Zip:		Telephone: 708 - 955-2442 Cell Phone:		
Address of Property: 45263 E. CABLE LAKE RD		City/State/Zip:		Contractor: JEROME EXCAVATING			Plumber: Plumber Phone:	
Authorized Agent: (Person Signing Application on behalf of Owner(s)) KARL KOSTRASY		Agent Phone: 715 580-0157		Agent Mailing Address (include City/State/Zip): 14295 MCNAUGHT RD CABLE, WI 54821		Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# 9172		Recorded Document: (Showing Ownership) JOHR 554242				
1/4, 1/4	Gov't Lot 1	Lot(s) 3	CSM 568	Vol & Page 4 143	CSM Doc #	Lot(s) #	Block #	Subdivision:
Section 01, Township 43 N, Range 8 W		Town of: CABLE		Lot Size		Acreage .443		

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline: _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Non-Shoreland	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage? If yes---continue →	Distance Structure is from Shoreline: _____ feet		

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) is on the property or Will be on the property?	Type of Water on property
\$	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		<input type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2 nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2 nd) Deck	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Special Use: (explain) SHORELAND EROSION	(14 X 100)	1400
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/> Other: (explain) _____	(X)		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____
 Date 4/2/2021

Address to send permit 14295 MCNAUGHT RD CABLE, WI 54821

Attach Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

MISSING HIGHLIGHTED 8-17-21

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – NO PENCIL

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N)** on Plot Plan
- (3) Show Location of (*): **(* Driveway and (* Frontage Road** (Name Frontage Road)
- (4) Show: **All Existing Structures** on your Property
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**

SEE ATTACHED MAP.

THIS DRIVEWAY RELOCATION WILL REDUCE THE AMOUNT OF IMPERVIOUS SURFACE

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks: (measured to the closest point)**

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		
Setback from the South Lot Line	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
 For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
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You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: 87495	# of bedrooms: shared 5	Sanitary Date: 11/7/86
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-00269		Permit Date: 8-17-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:			Zoning District (R-1)	
			Lakes Classification (2)	
Date of Inspection: 7/1/21	Inspected by: [Signature]		Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.)				
<ul style="list-style-type: none"> - Build Roadway as proposed - USE Best Management Practices for soil erosion - Remove & Restore to vegetation "old" impervious as proposed 				
Signature of Inspector: [Signature]			Date of Approval: 8/13/21	
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

TOWN BOARD RECOMMENDATION - - (CLASS A - SPECIAL USE)

Residence in Ag-1 or F-1; Shoreland Grading; Short-Term Rental (1 unit); Signage; RV Ext

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Website:
www.bayfieldcounty.org/147

Date Zoning Received: (Stamp Here)



APR 15 2021
 Bayfield Co. Zoning Dept.

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 1/2 x 14) [front/back]. This is a Class A special use request. **Note:** The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. **Ask Town if you should be present at their meeting(s).**

Property Owner JAMIE KLIMA **Contractor** MARK SELONE
Property Address 48263 E. CABLE LAKE RD. **Authorized Agent** BARL HASTROSKY
CABLE, WI 54821 **Agent's Telephone** 715-580-0157
Telephone 708-955-2442 **Written Authorization Attached:** Yes No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)
 _____ 1/4 of _____ 1/4, Section 1, Township 43 N., Range 8 W. Town of CABLE
 Govt. Lot 1 Lot 3 Block _____ Subdivision _____ CSM# 568
 Volume 4 Page 143 of Deeds Tax I.D# 9172 Acreage 943

Additional Legal Description: _____

Applicant: (State what you are asking for) **Zoning District:** R-1 **Lakes Classification** _____
SHORELAND GRADING PERMIT: RELOCATE A SMALL PORTION
OF AN EXISTING PRIVATE EASMENT RD TO ALLOW
THE EXISTING RESIDENCE TO MEET THE REQUIRED
ROADWAY SETBACK (SEE ATTACHED PLAN)

We, the Town Board, **TOWN OF** Cable, do hereby recommend to

Table **Approval** **Disapproval**

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: **Yes** **No**

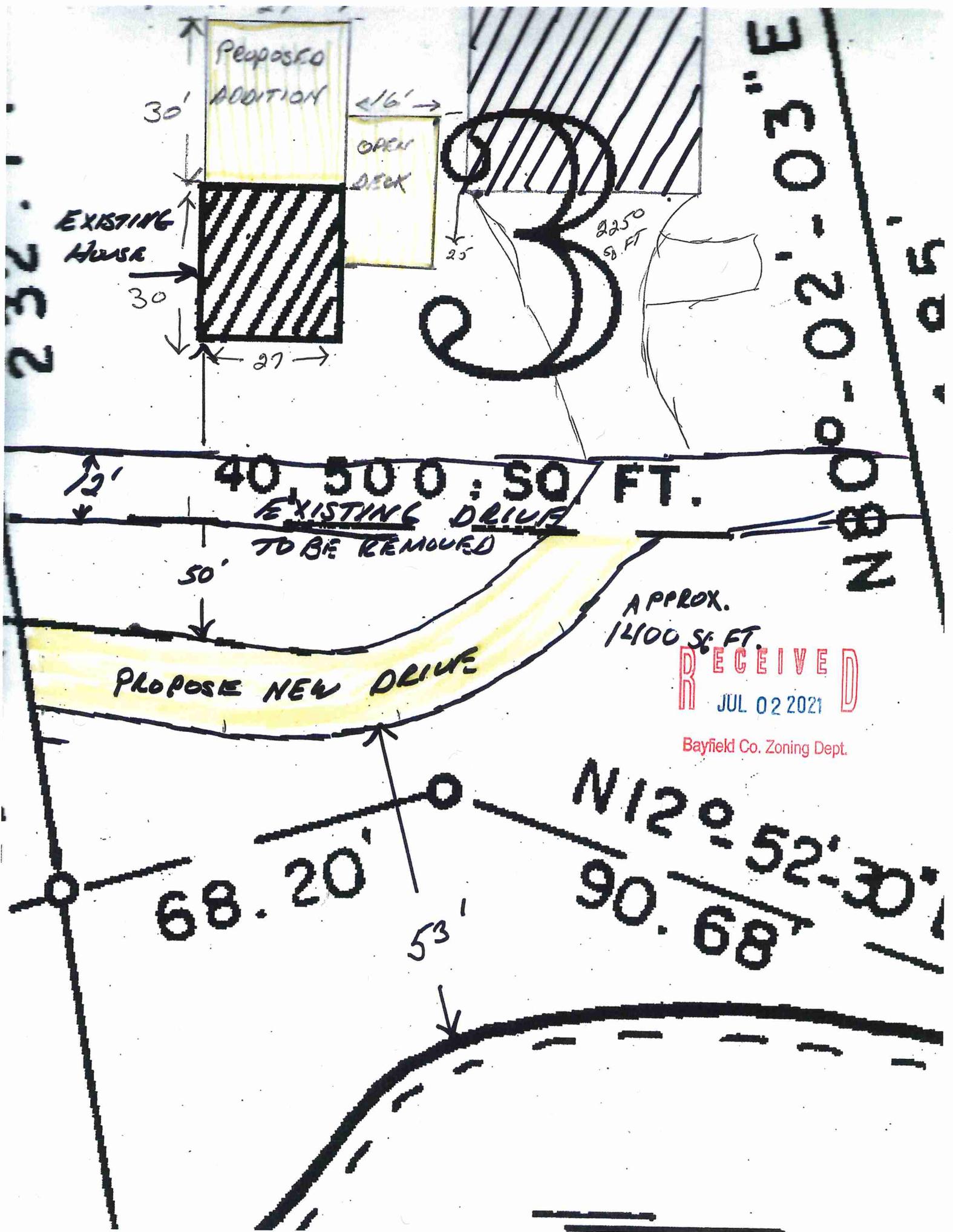
Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

- ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM:**
1. The Tabled, Approval or Disapproval box checked
 2. **The Town's reasoning for the tabling, approval or disapproval**
 3. The form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Signed:
 Chairman: [Signature]
 Supervisor: [Signature]
 Supervisor: [Signature]
 Supervisor: _____
 Clerk: [Signature]
 Date: 4/14/2021



Proposed
ADDITION

OPEN
DECK

EXISTING
HOUSE

40.500 : 50 FT.

EXISTING DRIVE
TO BE REMOVED

PROPOSE NEW DRIVE

APPROX.
1400 SQ. FT.

RECEIVED
JUL 02 2021

Bayfield Co. Zoning Dept.

68.20'

N 12° 52' 30"
90.68'

0°-02'-03"E

N 80°

99'

232'

30'

30'

27'

16'

25'

2250
SQ. FT.

53'



Karl Kastrosky
Land Development & Zoning Consultant

14295 McNaught Rd. Cable, WI 54821

715-580-0157

Kastrosky821@gmail.com

To Whom it may concern,

I hereby authorize **Karl Kastrosky** to act as my agent to procure permits and access information pertaining to my property at 45263 E. CABLE LAKE RD in the Town of CABLE County of BAFFIELD.

Jamie Levine
Signature

6/28/2021
Date

My contact information is:

Address: 45263 E. CABLE LAKE RD.

Phone: 708-955-2442

Email: _____

ELEVATION DETAIL

LOT 3 OF CSM NO. 568, LOCATED IN GOVERNMENT LOT 1 OF SECTION 1, T. 43 N., R. 8 W., IN THE TOWN OF CABLE, BAYFIELD COUNTY, WISCONSIN

ELEVATION INFORMATION

ELEVATIONS ARE NAVD88(FT.)

A B.F.E. FOR WILEY LAKE HAS NOT BEEN ESTABLISHED.

A LOMA WAS APPROVED BY FEMA FOR PART OF LOT 4 OF CSM NO. 568. THE LOWEST GROUND ELEVATION OF THE PROPERTY THAT WAS REMOVED FROM THE MAPPED FLOOD ZONE WAS 1378.2. SEE LOMA CASE NO. 13-05-2662A FOR ADDITIONAL INFORMATION.

THE LOWEST GROUND ELEVATION OF THE PROPOSED DRIVEWAY ON LOT 3 IS 1378.77.

BM - 1 - ONSITE BENCHMARK
 "5" ON THE TOP OF THE WELL CAP
 SOUTH OF THE EXISTING HOUSE
 ELEV. - 1388.06

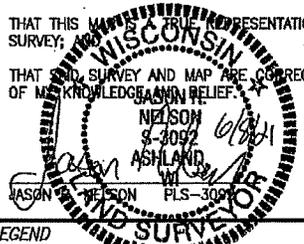
SURVEYOR'S CERTIFICATE

I, JASON R. NELSON, PROFESSIONAL LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY:

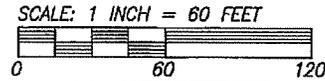
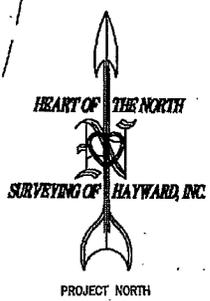
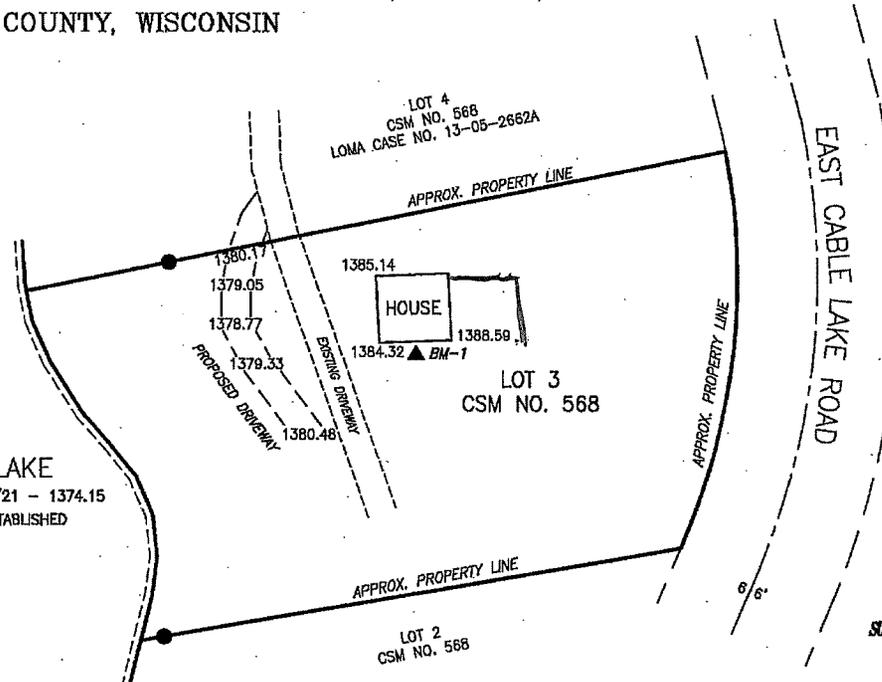
THAT ON THE ORDER OF JAMIE KLIMA, I HAVE PREPARED A ELEVATION DETAIL OF PART OF LOT 3 OF CSM NO. 568, LOCATED IN GOVERNMENT LOT 1 OF SECTION 1, T. 43 N., R. 8 W., IN THE TOWN OF CABLE, BAYFIELD COUNTY, WISCONSIN;

THAT THIS IS A TRUE AND CORRECT REPRESENTATION OF SAID SURVEY;

THAT THIS SURVEY AND MAP ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.



WILEY LAKE
 WATER ELEV. 05/14/21 - 1374.15
 B.F.E. NOT ESTABLISHED



LEGEND
 ● FOUND 1" IRON NAIL
 ▲ ONSITE BENCHMARK
 1378.00 SPOT ELEVATION

CLIENT: JAMIE KLIMA

JOB: H21
 SCALE: 1" = 60'
 NB.B-31 PG. 41
 FILE: T43NRBW/SEC1
 ACAD: H21_KLIMA
 PAC: H16_115

**HEART OF THE NORTH
 SURVEYING OF HAYWARD, INC.**

10339N DUFFY ROAD
 HAYWARD, WI 54843
 PH: 715/634-2442
 FAX: 715/634-8444
 WWW.HONSURVEYING.COM



Federal Emergency Management Agency

Washington, D.C. 20472

LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

COMMUNITY AND MAP PANEL INFORMATION		LEGAL PROPERTY DESCRIPTION
COMMUNITY	BAYFIELD COUNTY, WISCONSIN (Unincorporated Areas)	Lot 4, as shown on Certified Survey Map No. 000568, recorded as Document No. 366236, in Volume 4, Pages 143 and 144, in the Office of the Register of Deeds, Bayfield County, Wisconsin The portion of property is more particularly described by the following metes and bounds:
	COMMUNITY NO.: 550539	
AFFECTED MAP PANEL	NUMBER: 55007C0985D	
	DATE: 12/16/2011	
FLOODING SOURCE: WILEY LAKE		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 46.231, -91.303 SOURCE OF LAT & LONG: ARCGIS 10 DATUM: NAD 83

DETERMINATION

LOT	BLOCK/ SECTION	SUBDIVISION	STREET	OUTCOME WHAT IS REMOVED FROM THE SFHA	FLOOD ZONE	1% ANNUAL CHANCE FLOOD ELEVATION (NAVD 88)	LOWEST ADJACENT GRADE ELEVATION (NAVD 88)	LOWEST LOT ELEVATION (NAVD 88)
4	--	--	45261 East Cable Lake Road	Portion of Property	X (unshaded)	--	--	1378.2 feet

Special Flood Hazard Area (SFHA) - The SFHA is an area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood).

ADDITIONAL CONSIDERATIONS (Please refer to the appropriate section on Attachment 1 for the additional considerations listed below.)

LEGAL PROPERTY DESCRIPTION	STUDY UNDERWAY
PORTIONS REMAIN IN THE SFHA	STATE LOCAL CONSIDERATIONS
ZONE A	

This document provides the Federal Emergency Management Agency's determination regarding a request for a Letter of Map Amendment for the property described above. Using the information submitted and the effective National Flood Insurance Program (NFIP) map, we have determined that the described portion(s) of the property(ies) is/are not located in the SFHA, an area inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood). This document amends the effective NFIP map to remove the subject property from the SFHA located on the effective NFIP map; therefore, the Federal mandatory flood insurance requirement does not apply. However, the lender has the option to continue the flood insurance requirement to protect its financial risk on the loan. A Preferred Risk Policy (PRP) is available for buildings located outside the SFHA. Information about the PRP and how one can apply is enclosed.

This determination is based on the flood data presently available. The enclosed documents provide additional information regarding this determination. If you have any questions about this document, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, LOMA Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304-4605.

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



Federal Emergency Management Agency

Washington, D.C. 20472

LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

ATTACHMENT 1 (ADDITIONAL CONSIDERATIONS)

LEGAL PROPERTY DESCRIPTION (CONTINUED)

COMMENCING at the southeast corner of Section 1; thence N00°13'09"E, a distance of 979.07 feet; thence S78°34'16"W, a distance of 85.84 feet to the POINT OF BEGINNING; thence S78°34'16"W, a distance of 269.10 feet; thence N26°03'00"W, a distance of 40.00 feet; thence N21°30'00"E, a distance of 16.02 feet; thence N65°35'00"E, a distance of 75.00 feet; thence N20°00'00"E, a distance of 123.89 feet; thence N89°10'30"E, a distance of 133.89 feet; thence S11°52'20"E, a distance of 143.82 feet; thence along a curve to the right having a radius of 281.17, a central angle of 01°16'42", and a 6.27 foot long chord bearing S12°12'35"E, a distance of 6.27 feet to the POINT OF BEGINNING.

PORTIONS OF THE PROPERTY REMAIN IN THE SFHA (This Additional Consideration applies to the preceding 1 Property.)

Portions of this property, but not the subject of the Determination/Comment document, may remain in the Special Flood Hazard Area. Therefore, any future construction or substantial improvement on the property remains subject to Federal, State/Commonwealth, and local regulations for floodplain management.

ZONE A (This Additional Consideration applies to the preceding 1 Property.)

The National Flood Insurance Program map affecting this property depicts a Special Flood Hazard Area that was determined using the best flood hazard data available to FEMA, but without performing a detailed engineering analysis. The flood elevation used to make this determination is based on approximate methods and has not been formalized through the standard process for establishing base flood elevations published in the Flood Insurance Study. This flood elevation is subject to change.

STUDY UNDERWAY (This Additional Consideration applies to all properties in the LOMA DETERMINATION DOCUMENT (REMOVAL))

This determination is based on the flood data presently available. However, the Federal Emergency Management Agency is currently revising the National Flood Insurance Program (NFIP) map for the community. New flood data could be generated that may affect this property. When the new NFIP map is issued it will supersede this determination. The Federal requirement for the purchase of flood insurance will then be based on the newly revised NFIP map.

This attachment provides additional information regarding this request. If you have any questions about this attachment, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304-4605.

A handwritten signature in black ink, appearing to read "Luis Rodriguez".

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



Federal Emergency Management Agency

Washington, D.C. 20472

LETTER OF MAP AMENDMENT DETERMINATION DOCUMENT (REMOVAL)

ATTACHMENT 1 (ADDITIONAL CONSIDERATIONS)

STATE AND LOCAL CONSIDERATIONS (This Additional Consideration applies to all properties in the LOMA DETERMINATION DOCUMENT (REMOVAL))

Please note that this document does not override or supersede any State or local procedural or substantive provisions which may apply to floodplain management requirements associated with amendments to State or local floodplain zoning ordinances, maps, or State or local procedures adopted under the National Flood Insurance Program.

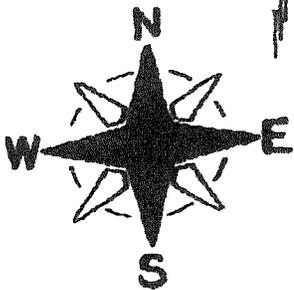
This attachment provides additional information regarding this request. If you have any questions about this attachment, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, LOMA Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304-4605.



Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration

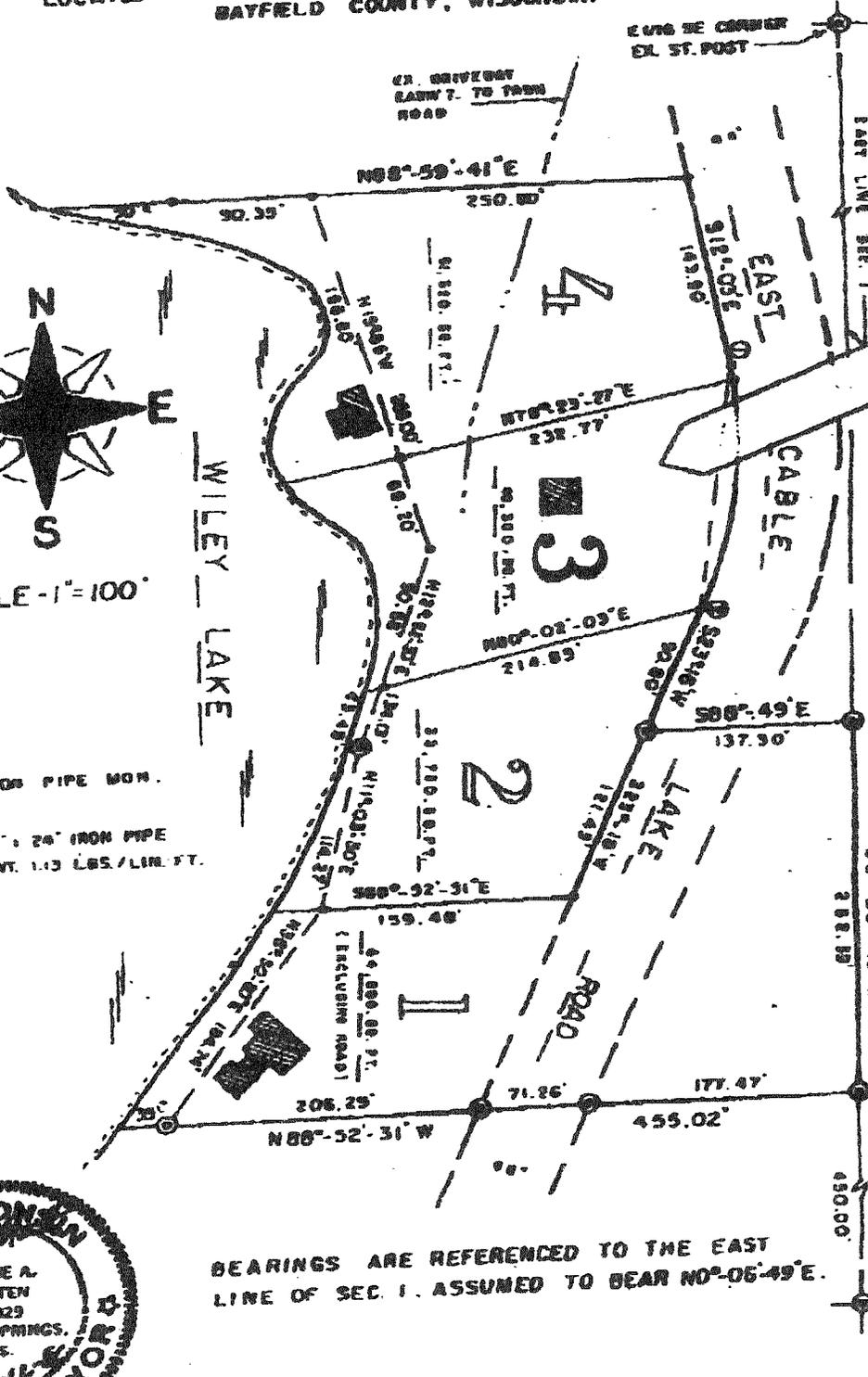
MEMBER'S OFFICE
 Bayfield County, Wis.
 RECEIVED AT 2 P.M.
 ON SEP 17 1965
 BY 4 *CSH* *113* *199*
 REG. NO. 366286
Olto Korhela

BAYFIELD CO. CERTIFIED SURVEY NO. 000568
 LOCATED IN GOVT. LOT 1, SEC. 1-T43N-R6W,
 BAYFIELD COUNTY, WISCONSIN.



SCALE - 1" = 100'

○ = EX. IRON PIPE MON.
 ○ = SET 1" x 24" IRON PIPE
 MIN. WT. 1.13 LBS./LIN. FT.



CURVE NO.	LOT NO.	ARC LENGTH	RADIUS	CHORD LENGTH	CHORD BEARING	DELTA ANGLE	TANGENT BEARING
1-2	17	173.50'	201.17'	170.26'	S84°35'30"W	38°18'	S12°05'E
4	6	6.82'	101.17'	6.18'	S11°35'E	1°18'	
		27.07'	381.17'	184.84'	S87°15'20"W	34°05'	

BEARINGS ARE REFERENCED TO THE EAST
 LINE OF SEC. 1. ASSUMED TO BEAR N0°-06'-49"E.

SE CORNER
 SEC. 1-T43N-R6W
 EX. 2 1/2" PIPE (CAPPED)

SURVEYOR'S CERTIFICATE:

I, Duane A. Marten, Registered Land Surveyor, hereby certify:

That I have surveyed, divided and mapped that part of Gov't. Lot 1, Sec. 1-T43N-R6W, Town of Cable, Bayfield County, Wisconsin, bounded and described as follows:

Commencing at the SE corner of said Sec. 1; thence N0°-06'-49"E, along the East line of the Sec., 450.00 feet to the point of beginning; thence N88°-52'-31"W, 455.02 feet to a point 35 feet, more or less, from the water's edge of Wiley Lake; thence N36°-50'-20"E along a meanderline, 184.74 feet; thence N11°-03'-30"E along a meanderline, 114.27 feet; thence N12°-52'-30"E along a meanderline, 134.13 feet; thence N15°-56'W along a meanderline, 265.00 feet to a point 180 feet, more or less, from the water's edge of Wiley Lake; thence N86°-59'-41"E, 250.80 feet to the Westerly line of East Cable Lake Road; thence S12°-03'E along said Westerly line, 143.90 feet; thence along said Westerly line on a curve concave to the NW and having a radius of 281.17 feet (the chord which bears S5°-36'-30"W, 170.56 feet) a distance of 173.29 feet; thence S23°-16'W along said Westerly line, 90.60 feet; thence S88°-49'E, 137.30 feet to the East line of Sec. 1; thence S0°-06'-49"W along said Easterly line, 262.39 feet to the point of beginning. Including all lands lying between the above described meanderline and the respective lot lines extended to the water's edge of Wiley Lake. Together with the right of ingress and egress to the Town Road over an existing Driveway as now being used and constructed. Subject to lands now being used for Roadway purposes and subject to all other easements and reservations of record.

That such plat is a correct representation of all exterior boundaries of the land surveyed and the subdivision thereof made.

That I have made such survey and plat by the order and under the direction of Mr. John Ulrich.

That I have fully complied with Chapter 236.34 of the Wisconsin Statutes and the subdivision regulations of Bayfield County to the best of my knowledge and belief.

Dated this 12 day of Sept., 1986.



Duane A. Marten

DUANE A. MARTEN, REGISTERED LAND SURVEYOR
VACATIONLAND SURVEYOR'S, INC.
SOLON SPRINGS, WIS.

APPROVED: BAYFIELD CO. ZONING COMMITTEE
DATED: 17 SEPTEMBER 1986
DAVE LEE Dana Ken ADM.

Document Number

DECLARATION OF EASEMENTS AND
JOINT MAINTENANCE AGREEMENTS

PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2006R-506983

05/31/2006 10:00:02AM

TF EXEMPT #:

RECORDING FEE: 15.00

PAGES: 3

RE: Lots One (1), Two (2), Three (3) and Four (4), Bayfield County Certified Survey Map No. 000568, as recorded in Volume 4 of CSM, Pages 143 - 144 as Document No. 366236, being a parcel of property located in Government Lot One (1), Section One (1), Township Forty-three (43) North, Range Eight (8) West, Town of Cable, Bayfield County, Wisconsin.

This Declaration is entered into this 26th day of May, 2006 by Anne Boguslavsky, hereinafter referred to as Declarant.

WHEREAS Declarant is the owner of the above described real estate, consisting of four lots located on Wiley Lake in Bayfield County, Wisconsin; and

WHEREAS Lots Two (2), Three (3) and Four (4) jointly share and utilize a driveway for ingress and egress from East Cable Lake Road to said lots; and

WHEREAS Lots Two (2), Three (3) and Four (4) share a common septic system which is utilized by improvements located on said lots, the lift station being located upon Lot Three (3) and drain field being located upon Lots Three (3) and Four (4); and

WHEREAS the drain field for the septic system benefiting Lot One (1) is partially located on Lot Two (2); and

WHEREAS Declarant desires to grant easements benefiting and burdening the above described real estate pertaining to the existing joint driveway and septic systems; and

WHEREAS Declarant desires to establish a maintenance agreement pertaining to the joint driveway access and septic system utilized by Lots Two (2), Three (3) and Four (4).

NOW, THEREFORE, the undersigned Declarant hereby declares, establishes and set forth the following declarations and agreements which shall be binding upon the Declarant, her heirs, successors and assigns:

1. A permanent and perpetual easement for ingress and egress is hereby established over and across Lots Three (3) and Four (4), said access easement being for the use and benefit of Lots Two (2), Three (3) and Four (4). The location of said access easement is as presently constructed, and as set forth on the attached Certified Survey Map (Exhibit A). The width of said access easement shall be twenty (20) feet in width.
2. The owners of Lots Two (2), Three (3) and Four (4) are also granted an easement for ingress and egress from East Cable Lake Road to Lots Two (2), Three (3) and Four (4) over and across that certain easement granted to Declarant by James A. Brakken and Sybil L. Brakken over and across a portion of the North 200 feet of Government Lot One (1), Section One (1), Township Forty-three (43) North, Range Eight (8) West.
3. The owners of Lots Two (2), Three (3) and Four (4) shall be jointly responsible for the cost of maintenance and repair of said twenty (20) foot access easement. In the event, however, any lot owner causes damage to said access easement by virtue of construction activity or other activity upon his or her lot, said lot owner shall be solely responsible to repair any damage causes as a result of said construction activity or other activity.
4. The owners of Lots Two (2), Three (3) and Four (4) shall have the joint use of the septic system which services improvements located upon said lots.
5. A perpetual easement to access, repair, maintain and replace said septic system, including any sewer pipes, lines, tanks, lift station and drain field located upon Lots Three (3) and Four (4) are hereby granted and reserved, said easements being for the benefit of the lot owners of Lots Two (2), Three (3) and Four (4).
6. The owners of Lots Two (2) and Four (4) are hereby granted easements to access, repair and maintain any sewer pipes, lines or tanks located upon Lot Three (3) which Lots Two (2) and Four (4) utilize in conjunction with the joint septic system.

Recording Area

Name and Return Address

SAWYER COUNTY ABSTRACT
PO BOX 169
HAYWARD, WI 54843

14300

012 108207

Parcel Identification Number (PIN)

V945 P249

EASEMENT

Document Number

PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2006R-506982

05/31/2006 10:00:01AM

TF EXEMPT #:

RECORDING FEE: 15.00

PAGES: 3

RE: The North 200 feet of Government Lot One (1), Section One (1), Township Forty-three (43) North, Range Eight (8) West and Lots Two (2), Three (3) and Four (4), Bayfield County Certified Survey Map No. 000568, as recorded in Volume 4 of CSM, Pages 143 - 144 as Document No. 366236, being a parcel of property located in Government Lot One (1), Section One (1), Township Forty-three (43) North, Range Eight (8) West, Town of Cable, Bayfield County, Wisconsin.

Agreement entered into as of this 26th day of May, 2006 by and between Anne Boguslavsky, hereinafter referred to as Boguslavsky and James A. Brakken and Sybil L. Brakken, hereinafter referred to as Brakken.

WHEREAS Boguslavsky is the owner of Lots Two (2), Three (3) and Four (4) of Bayfield County Certified Survey Map No. 000568 and Brakken is the owner of the North 200 feet of Government Lot One (1); and

WHEREAS a driveway presently exists over and across the property owned by Brakken, said driveway running from East Cable Lake Road and benefiting Lots Two (2), Three (3) and Four (4) of Bayfield County Certified Survey Map No. 000568; and

WHEREAS Brakken utilizes and desires to be granted an access easement from the Brakken property to Wiley Lake over a portion of Lot Four (4) of Bayfield County Certified Survey Map No. 000568.

Recording Area

Name and Return Address
SAWYER COUNTY ABSTRACT
PO BOX 169
HAYWARD, WI, 54843

14300

012108207
Parcel Identification Number (PIN)

NOW, THEREFORE, IT IS HEREBY AGREED AS FOLLOWS:

1. Brakken hereby grants to Boguslavsky, her heirs, successors and assigns a permanent and perpetual twenty (20) foot wide driveway access easement over and across the Brakken property from East Cable Lake Road to and benefiting Lots Two (2), Three (3) and Four (4) of Certified Survey Map No. 000568. The location of said driveway easement shall be as presently constructed, and as shown on Bayfield County Certified Survey Map No. 000568, a copy of which is attached hereto and incorporated herein.
2. Brakken, their heirs, successors and assigns is hereby granted an access easement over and across that portion of the northwest corner of Lot Four (4), CSM 000568 as designated on attached Exhibit A. Said easement area is designated "Brakken access easement." Boguslavsky, her heirs, successors and assigns shall erect no improvements, nor place any docks, piers or other structures upon said easement area.
3. The easements set forth herein shall be permanent in nature and shall be binding upon the parties hereto, their respective heirs, successors and assigns.

Anne Boguslavsky
Anne Boguslavsky

ACKNOWLEDGMENT

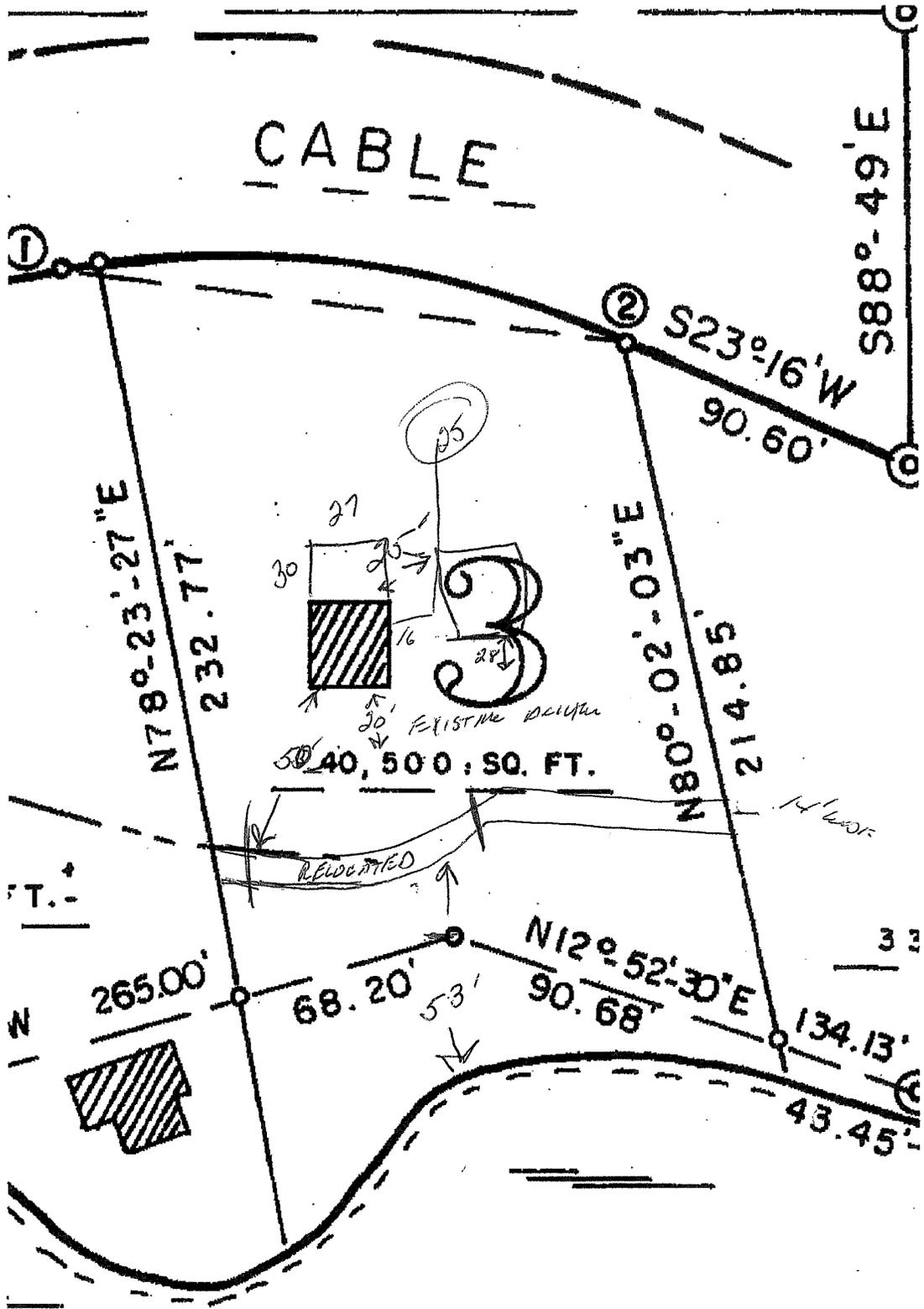
STATE OF ILLINOIS)
)
COUNTY OF LAKE)

V945 P246

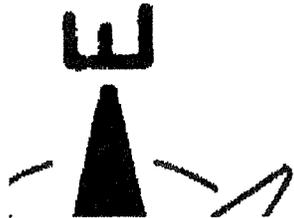
Personally came before me this 26th day of May, 2006 the above named Anne Boguslavsky, to me known to be the person who executed the foregoing instrument and acknowledge the same.

Joseph R. Bordenave
Notary Public, LAKE County, IL
My commission: _____

"OFFICIAL SEAL"
Joseph R. Bordenave
Notary Public, State of Illinois
My Commission Expires 8-14-2007



1000
14
14000



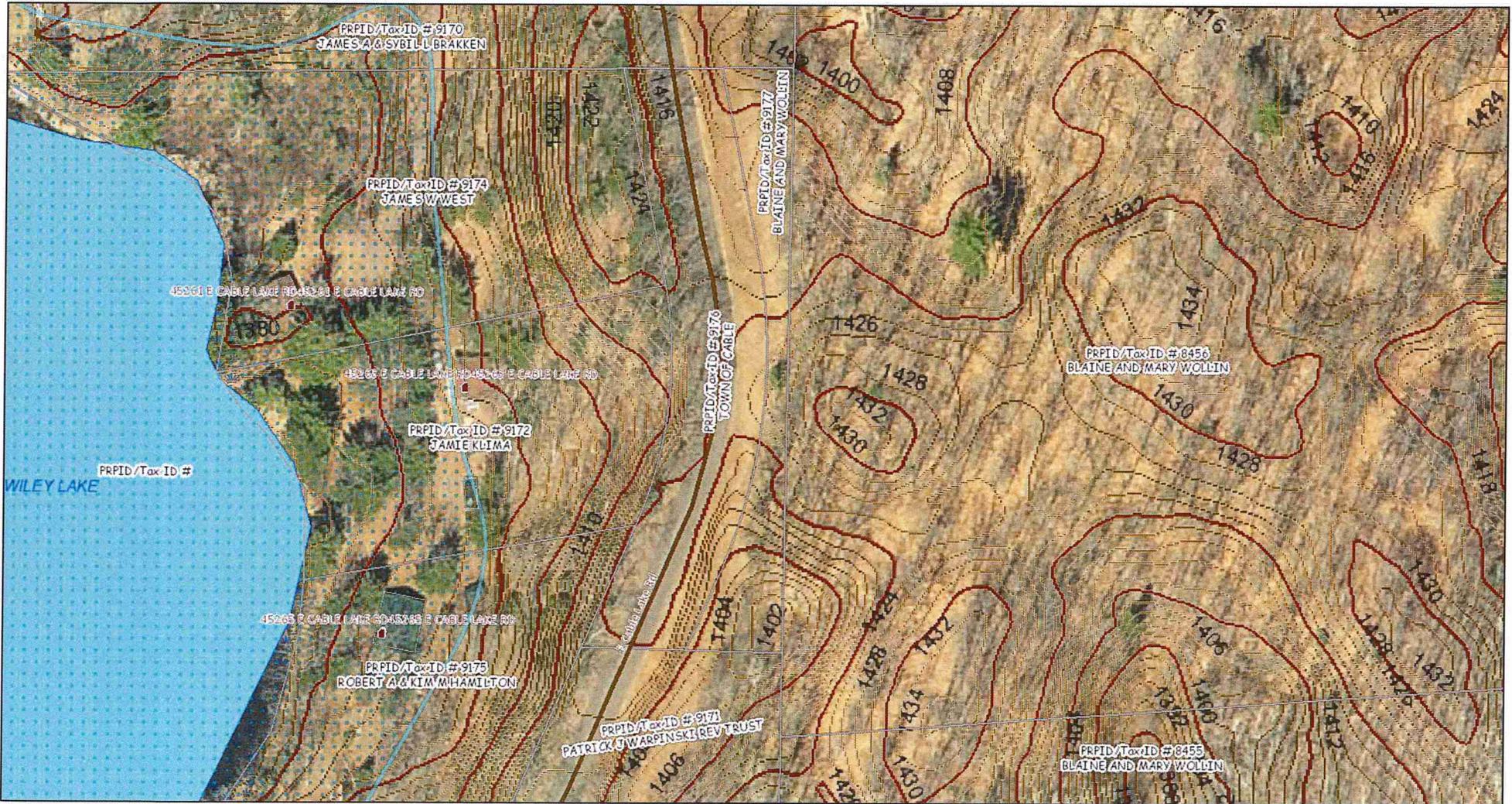
135
x 12

00'

1" = 45'

WILEY LAKE

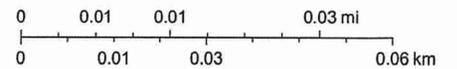
Bayfield County, WI



4/27/2021, 8:36:53 AM

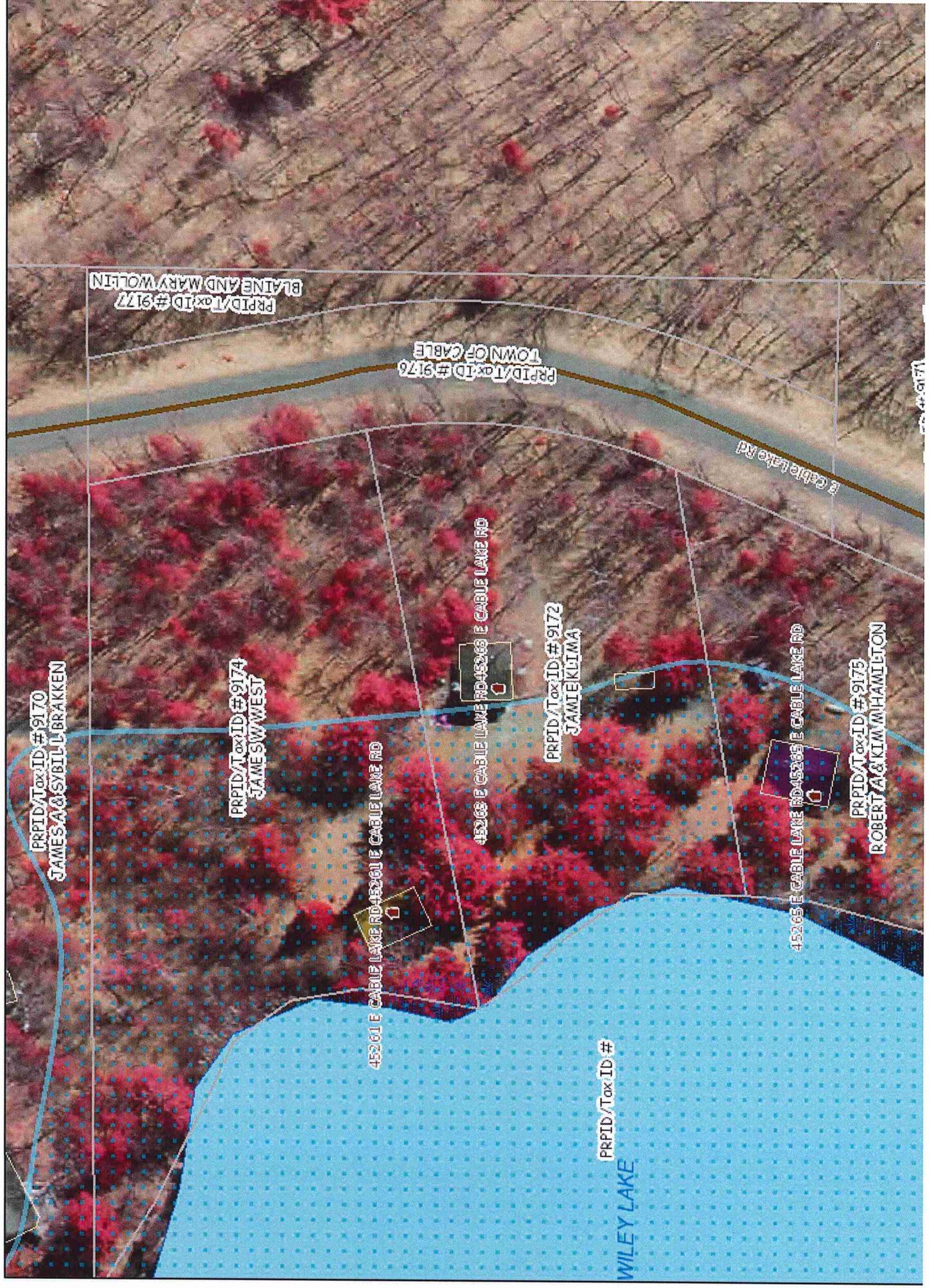
- | | | |
|-----------------------------|------------------|--------------------------------------------------------------------------------------------------|
| Nonmetallic Mine | Road Type | Lake Superior Shoreline Recession Segments |
| Reservation Boundary | Federal | Approximate average annual rate of bluff recession in this reach of shoreline is 0.3 feet. |
| Wetlands | State | Approximate average annual rate of bluff recession in this reach of shoreline is 0.3 feet. |
| Rivers | County | The average annual rate of bluff recession in this reach of shoreline is approximately 0.1 feet. |
| Lakes | Town | The average annual rate of bluff recession in this reach of shoreline is approximately 0.1 feet. |
| Approximate Parcel Boundary | CFR | The average annual rate of bluff recession in this reach of shoreline is approximately 0.2 feet. |
| | Private | The average annual rate of bluff recession in this reach of shoreline is approximately 0.3 feet. |

1:783



Bayfield County Land Records Department

Bayfield County, WI



PRPID/Tox ID # 9170
JAMES A & SYBILLE BRAKKE

PRPID/Tox ID # 9174
JAMES W WEST

45261 E CABLE LAKE RD 45261 E CABLE LAKE RD

45268 E CABLE LAKE RD 45268 E CABLE LAKE RD

PRPID/Tox ID # 9172
JAMIE KUIMA

45265 E CABLE LAKE RD 45265 E CABLE LAKE RD

PRPID/Tox ID # 9175
ROBERT A & KIM M HAMILTON

PRPID/Tox ID # 9177
BLAINE AND MARY WOLFIN

PRPID/Tox ID # 9176
TOWN OF CABLE

E Cable Lake Rd

PRPID/Tox ID: #
WILEY LAKE

Description Updated: 12/1/2020

Tax ID: 9172
PIN: 04-012-2-43-08-01-4 05-001-90000
 Legacy PIN: 012108208990
 Map ID:
 Municipality: (012) TOWN OF CABLE
 STR: S01 T43N R08W
 Description: LOT 3 CSM #568 IN V.4 P.143 (LOCATED IN GOVT LOT 1) IN V.1124 P.907
 Recorded Acres: 0.930
 Calculated Acres: 0.943
 Lottery Claims: 0
 First Dollar: Yes
 Zoning: (R-1) Residential-1
 ESN: 108

Tax Districts Updated: 3/15/2006

STATE
 COUNTY
 TOWN OF CABLE
 SCHL-DRUMMOND
 TECHNICAL COLLEGE

Recorded Documents Updated: 3/15/2006

QUIT CLAIM DEED
 Date Recorded: 5/13/2014 **2014R-554242 1124-907**

WARRANTY DEED
 Date Recorded: 5/31/2006 2006R-506985 945-254

CONVERSION
 Date Recorded: 503773 755-111

QUIT CLAIM DEED
 Date Recorded: 12/12/2005 2005R-503773 934-355

Ownership Updated: 12/1/2020

JAMIE KLIMA CABLE WI

Billing Address: 45263 E CABLE LAKE RD
 CABLE WI 54821

Mailing Address: 45263 E CABLE LAKE RD
 CABLE WI 54821

Site Address * indicates Private Road

45263 E CABLE LAKE RD CABLE 54821

Property Assessment Updated: 3/30/2021

2021 Assessment Detail

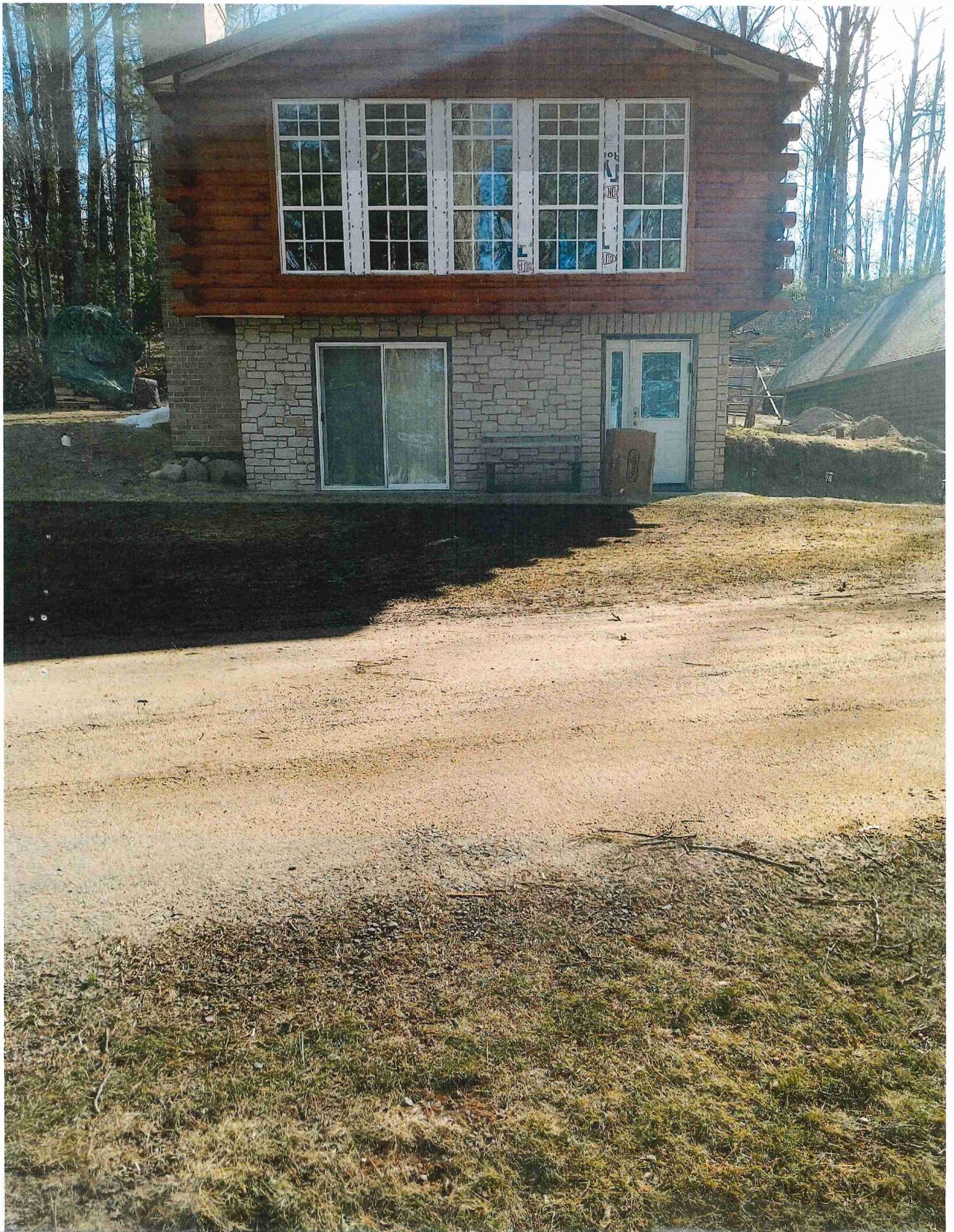
Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.930	86,800	80,300

2-Year Comparison

	2020	2021	Change
Land:	86,800	86,800	0.0%
Improved:	77,600	80,300	3.5%
Total:	164,400	167,100	1.6%

Property History

N/A



Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **87495 (11/7/1986)**
SIGN –
SPECIAL – **Class A**
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0269** Issued To: **Jamie Klima / Karl Kastrosky, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **1** Township **43** N. Range **8** W. Town of **Cable**

Gov't Lot Lot **3** Block Subdivision CSM# **568**

For: **Residential Other: [Shoreland Grading (14' x 100') = 1,400 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build roadway as proposed. Use best management practices for soil erosion. Remove and restore to vegetation "old" impervious as proposed.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

August 17, 2021

Date

SUBJECT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN

RECEIVED
 Date Stamp (Received)
 JUL 02 2021
 Bayfield Co. Zoning Dept.



Permit #:	21-0270
Date:	8-17-21
Amount Paid:	\$195 78-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: JANIE KLIMA		Mailing Address: LK RD. 45263 E. CABLE		City/State/Zip: CABLE, WI 54821		Telephone: 708-955-2442		
Address of Property: 45263 E. CABLE LK RD.		City/State/Zip: CABLE WI 54821					Cell Phone:	
Contractor: SELF		Contractor Phone:		Plumber:		Plumber Phone:		
Authorized Agent: (Person Signing Application on behalf of Owner(s)) KARL KASTROSKY		Agent Phone: 715-580-0157		Agent Mailing Address (include City/State/Zip): 14295 MCNAUGHT RD CABLE, WI, 54821		Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# 9172		Recorded Document: (Showing Ownership)				
1/4, 1/4	Gov't Lot 1	Lot(s) 3	CSM 568	Vol & Page 4 143	CSM Doc #	Lot(s) #	Block #	Subdivision:
Section _____, Township _____ N, Range _____ W		Town of:		Lot Size		Acreage .929		

<input type="checkbox"/> Shoreland	<input checked="" type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Non-Shoreland	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage? If yes---continue →	Distance Structure is from Shoreline : _____ feet		

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$65,000 e3 195-	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type:	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: IN GROUND PRESSURE	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)				<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
			<input checked="" type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
				<input type="checkbox"/> None		

Existing Structure: (if addition, alteration or business is being applied for)	Length: 27	Width: 30	Height: 24
Proposed Construction: (overall dimensions)	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2nd) Deck	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____ GREAT ROOM	(X)	
	<input checked="" type="checkbox"/>	Addition/Alteration (explain) LIVING SPACE	(27 X 30)	810
	<input type="checkbox"/>	Accessory Building (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Other: (explain) ATTACHED OPEN DECK	(16 X 25)	400

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ Date: _____
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
 Authorized Agent: Karl Kastrosky Date: 6/2/2021
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 14295 MCNAUGHT RD CABLE, WI 54821
 Attach Copy of Tax Statement
 If you recently purchased the property send your Recorded Deed
 Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – NO PENCIL

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(* Driveway and (* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(* Well (W); (* Septic Tank (ST); (* Drain Field (DF); (* Holding Tank (HT) and/or (* Privy (P)**
- (6) Show any (*): **(* Lake; (* River; (* Stream/Creek; or (* Pond**
- (7) Show any (*): **(* Wetlands; or (* Slopes over 20%**

SEE ATTACHED SITE PLANS AND INFORMATION

IN ADDITION THE "ELEVATION DETAIL" WHICH INDICATES THE PROPOSED DRIVEWAY EXISTING GRADE IS HIGHER THAN THE APPROVED LOTLINE ON THE ADJOINING LOT 4 OF CS# 568

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	130 Feet	Setback from the Lake (ordinary high-water mark)	115 Feet
Setback from the Established Right-of-Way	97 Feet	Setback from the River, Stream, Creek	— Feet
		Setback from the Bank or Bluff	— Feet
Setback from the North Lot Line	18 Feet		
Setback from the South Lot Line	108 Feet	Setback from Wetland	— Feet
Setback from the West Lot Line	115 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	130.945 Feet	Elevation of Floodplain B.F.E. NOT ESTABLISHED	Feet
		WATER ELEVATION 1374.15	
Setback to Septic Tank or Holding Tank	765 Feet	Setback to Well	3 Feet
Setback to Drain Field	> 25 Feet		
Setback to Privy (Portable, Composting)	— Feet	HOUSE ELEVATION 1384.32	

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
 For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
 The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: 87495	# of bedrooms: 5	Sanitary Date: 11/7/86
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0070		Permit Date: 2-18-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input checked="" type="checkbox"/> Yes To Road - 2021 permit to meet setback <input type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:		Zoning District (R-2) Lakes Classification ()		
Date of Inspection: 7/1/21	Inspected by: [Signature]	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.) - Build as proposed - Get required WDC inspections - Remove "old" impervious & restore to vegetation				
Signature of Inspector: [Signature]				Date of Approval: 6/2/21
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Bayfield County Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Property Owner(s): <i>JANIE KLIMA</i>				
Mailing Address: <i>CABLE WI 54821 45263 E. CABLE LAKE RD.</i>		Property Address <i>45263 E. CABLE LAKE RD</i>		
Legal Description: _____ 1/4, _____ 1/4,		Section, Township, Range Sec <u><i>01</i></u> Township <u><i>43</i></u> N, Range <u><i>08</i></u> W		
Authorized Agent/Contractor <i>KARL HASTROSIG</i>		Gov't Lot <i>1</i>	Lot # <i>3</i>	CSM# <i>568</i>
Vol & Page <i>04 P143</i>	Town of: <i>CABLE</i>			
Parcel ID # (PIN #) <i>04-012-2-43-08-01-4 05-001</i>	<i>90000</i>	Tax ID # <i>9172</i>	Date: <i>3/25/2021</i>	

Impervious Surface: An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

Impervious Surface Standard: Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

Existing Impervious Surfaces: For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair of all impervious surfaces:
- b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

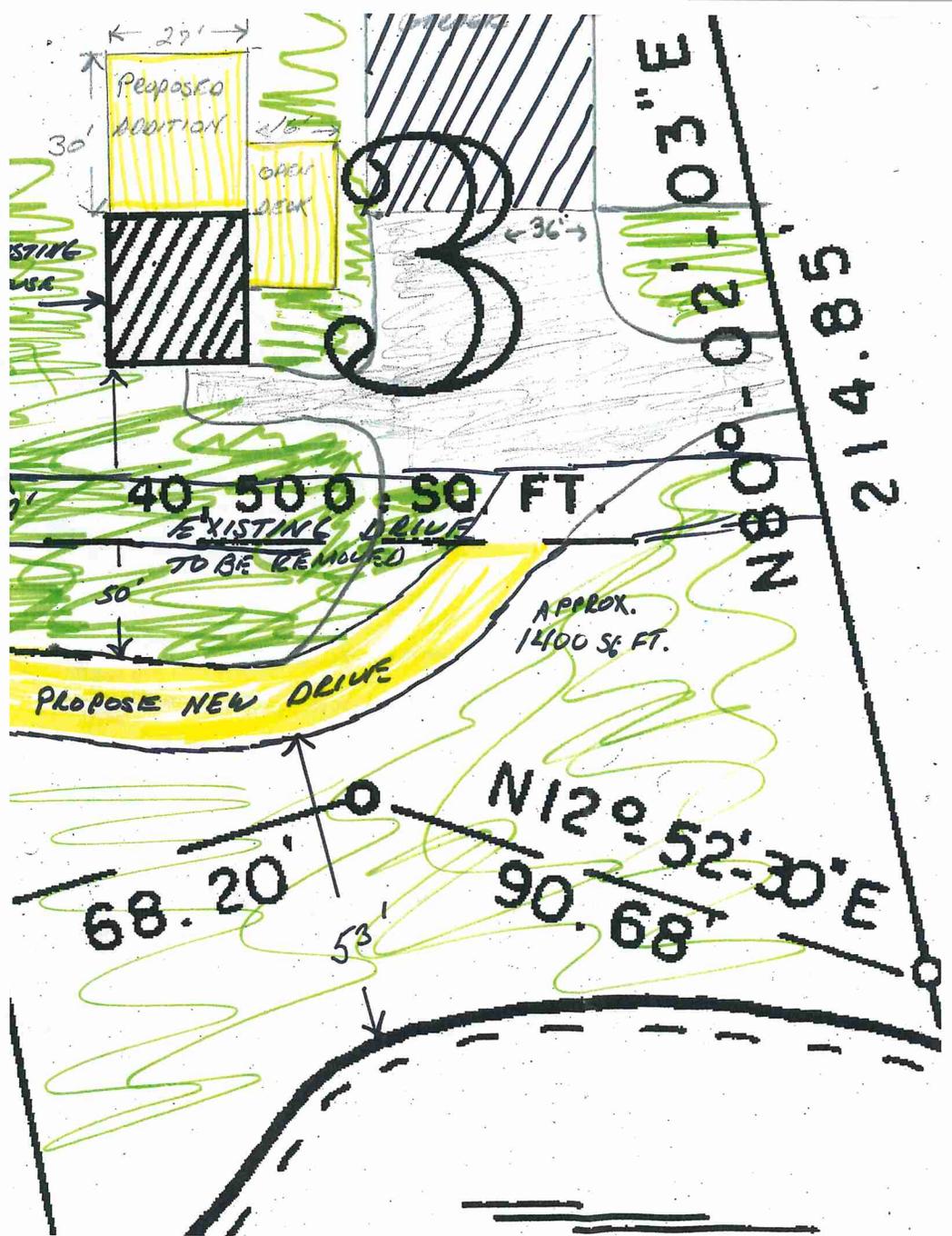
Impervious Surface Item	Dimension	Area (Square Footage)
Existing House	27' x 30'	810
Existing Accessory Building/Garage	42' x 54'	2268
Existing Sidewalk(s), Patio(s) & Deck(s)	—	3078
Existing Covered Porch(es), Driveway & Other Structures	REMAINING 45' x 50' REMOVE 12' x 90'	2250 - 1080
Proposed Addition/House	27' x 30'	810
Proposed Accessory Building/Garage	—	4248 5058
Proposed Sidewalk(s) & Patio(s)	—	
Proposed Covered Porch(es) & Deck(s)	PERVIOUS 1/4 SPACING 16' x 25' = 400 OPEN	—
Proposed Driveway	12' x 110'	1320
Proposed Other Structures	—	6378
WE PROPOSE ALL STRUCTURES WILL BE CONSIDERED STORM WATER RETAINED ON SITE		
Total:		

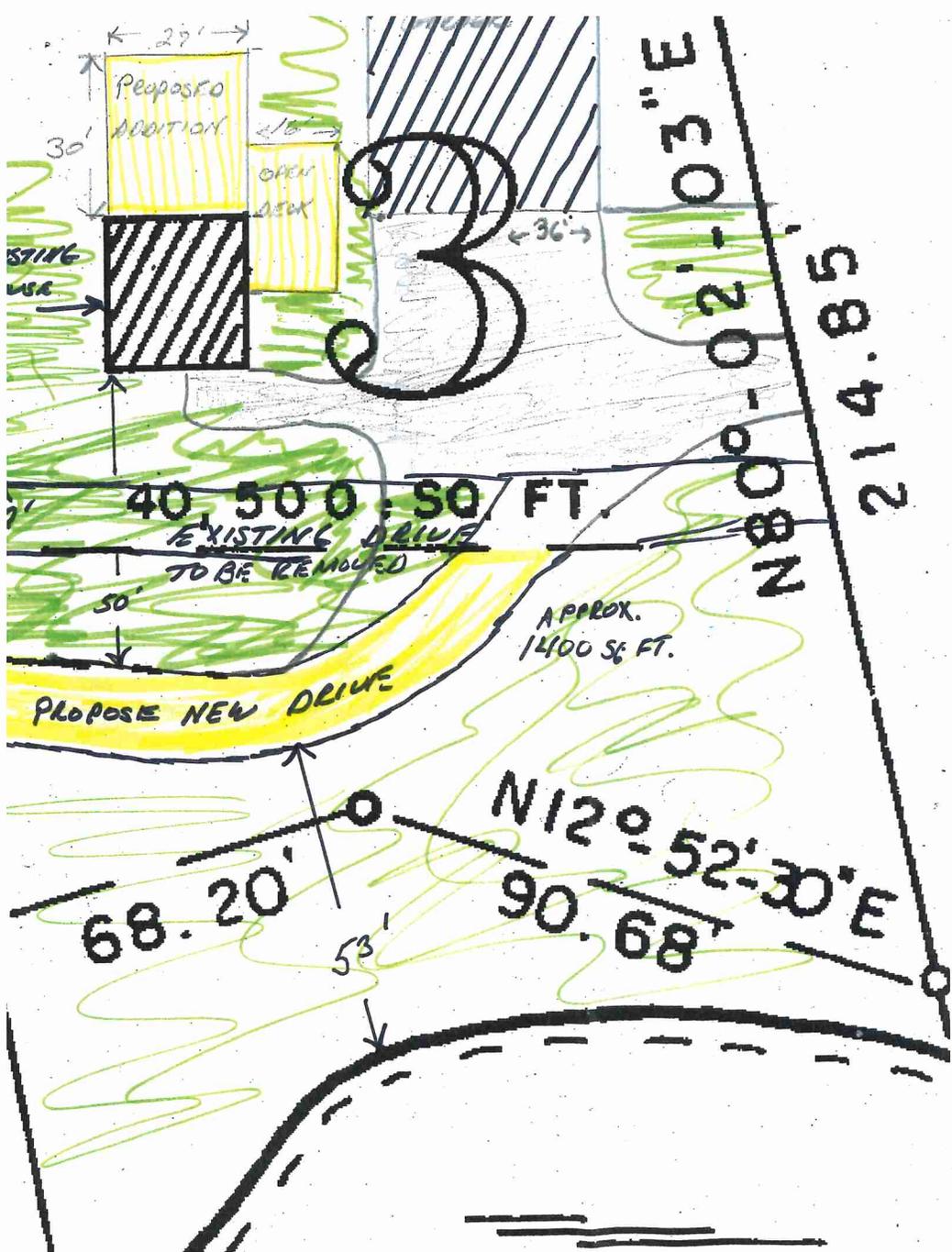
- a. Total square footage of lot: 40,500 e .92975 ACRES
- b. Total impervious surface area: 6378
- c. Percentage of impervious surface area: $100 \times (b)/a =$ 15.7%

If the proposed impervious surface area is greater than 15% mitigation is required.

Total square footage of additional impervious surface allowed: @ 15% 6075 @ 30% 12150
COMPILED + DRAFTED BY MARK K.

Issuance Information (County Use Only)		Date of Inspection: <u>7/16/21</u>
Inspection Record: <u>- NEW Rd will contain stormwater</u>		Zoning District (<u>R-1</u>) Lakes Classification (<u>2</u>)
Condition(s): <u>- Build New Road & Remove old as proposed</u> <u>- USE Erosion Control Best Management Practices</u>		Stormwater Management Plan Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Signature of Inspector: <u>[Signature]</u>		Date of Approval: <u>7/19/21</u>







FLOWS AND LOADS AFFIDAVIT

2021R-590018

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
07/29/2021 11:30AM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 3

Legal Description:

_____ 1/4, _____ 1/4, Section 1, Township 43 N, Range 8 W

Add'l Legal _____

_____ Gov't Lot 1

Lot 3 Block _____ Subdivision or CSM #568 in v. 4, p. 143-144

CSM Doc # (required) 366236 CSM Vol/Page 4/143-144

Tax ID # 9172 Township Cable

Property Owner Jamie Klima

Mailing Address 45263 E. Cable Lake Rd.

City, State, Zip Cable, WI 54821

Recording Area

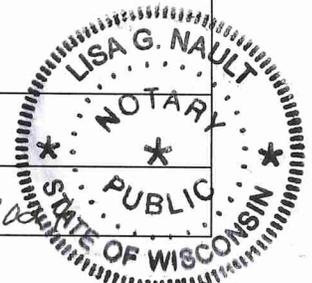
Return To:
Planning and Zoning Dept

It has been determined that the existing private sewage system (or components thereof) located on the above described parcel of land is sized for # 5 bedrooms and 750 gallons per day. Therefore the POWTS is not adequately sized to accommodate an increase in the number of bedrooms for the dwelling served or to be served. To resolve this situation without replacing the private sewage system at this time, the owner(s) of the above described property agree to the following stipulations:

1. Occupancy exceeding this number may constitute a violation of State and County private sewage system regulations. The Governmental Unit may issue orders to correct and/or may commence legal action if at any time it is determined that occupancy exceeds the maximum listed number contrary to this agreement.
2. It is understood when the existing POWTS fails it shall be replaced with a properly sized and code compliant private sewage system. This information is on file in the office of the County Planning & Zoning Department.
3. This Agreement is binding upon the Owner and his/her heirs, successors, and assignees. The Owner shall have this Agreement filed and recorded with the County Register of Deeds in a manner which will permit the existence of the Agreement to be determined by reference to the Property containing the sewage system.
4. This Agreement will remain in effect until the Governmental Unit, responsible for the issuance of sanitary permits for POWTS, certifies that this restriction is no longer required.

- 150 gallons per day or 2 persons (maximum occupancy for structure)
750 " " " " 10 " " " " the three structures
- _____ gallons per day or _____ persons (child occupancy for day care in structure)

Owner(s) Name(s) – Please Print <u>Jamie Klima</u>	Subscribed and sworn to before me on this date: <u>June 28, 2021</u>
Notarized Owner(s) – Signature(s) <u>Jamie Klima</u>	Notary Public <u>Lisa Nautil</u> My Commission Expires <u>9/25/2022</u>



Drafted by: J. Rasmussen Date: 6/28/2021

Document Number

This Deed, made between Jamie Klima & Suzanne Klima

Grantor, and Jamie Klima

Grantee.
Grantor quit claims to Grantee the following described real estate in
Bayfield County, State of Wisconsin (if more
space is needed, please attach addendum):

Lot Three (3) as recorded in Volume Four (4) of Certified Survey Maps, page
143-144, Survey No. 000568.

Together with a non-exclusive easement for ingress and egress as set forth by
instruments recorded May 31, 2006 in Volume 945 of records, Page 254, Doc. No.
506963.

PAIRLILIA H. OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2014R-554242

05/13/2014 11:05AM
TF EXEMPT #: 8M
RECORDING FEE: 30.00
PAGES: 1

Recording Area

Name and Return Address
Spears, Carlson & Coleman
P. O. Box 547
Washburn, WI 54891

04-012-2-43-08-01-4 05-001-90000
Parcel Identification Number (PIN)

This is homestead property.
(is) ~~(is not)~~

Together with all appurtenant rights, title and interests.

Dated this 8 day of May 2014

SUZANNE KLIMA
Suzanne Klima
JAMIE KLIMA
Jamie Klima
AUTHENTICATION

Signature(s) _____

authenticated this _____ day of _____

TITLE: MEMBER STATE BAR OF WISCONSIN

(If not, _____
authorized by § 706.06, Wis. Stats.)

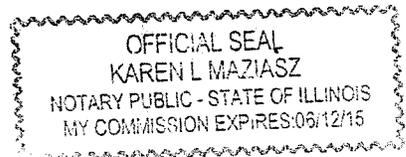
THIS INSTRUMENT WAS DRAFTED BY

Linda I. Coleman, Esq. SBN 1088532
122 W. Bayfield St., Washburn, WI 54891

(Signatures may be authenticated or acknowledged. Both are not necessary.)

* Names of persons signing in any capacity must be typed or printed below their signature.

QUIT CLAIM DEED



ACKNOWLEDGMENT

STATE OF IL)
) ss.
COOK County)

Personally came before me this 8th day of
MAY 2014 the above named
SUZANNE KLIMA +
JAMIE KLIMA

to me known to be the person(s) who executed the foregoing
instrument and acknowledged the same.

Karen L. Maziasz
Notary Public, State of IL
My Commission is permanent. (If not, state expiration date:
6/12, 2015)

V1124 P907

Real Estate Bayfield County Property Listing

Today's Date: 6/28/2021

Property Status: C

Created On: 3/15/2006 1:15

Description Updated: 12/1/2020

Tax ID:	9172
PIN:	04-012-2-43-08-01-4 05-001-90000
Legacy PIN:	012108208990
Map ID:	
Municipality:	(012) TOWN OF CABLE
STR:	S01 T43N R08W
Description:	LOT 3 CSM #568 IN V.4 P.143 (LOCATED IN GOVT LOT 1) IN V.1124 P.907
Recorded Acres:	0.930
Calculated Acres:	0.943
Lottery Claims:	0
First Dollar:	Yes
Zoning:	(R-1) Residential-1
ESN:	108

Tax Districts Updated: 3/15/2006

1	STATE
04	COUNTY
012	TOWN OF CABLE
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE

Recorded Documents Updated: 3/15/2006

QUIT CLAIM DEED	
Date Recorded: 5/13/2014	2014R-554242 1124-907
WARRANTY DEED	
Date Recorded: 5/31/2006	2006R-506985 945-254
CONVERSION	
Date Recorded:	503773 755-111
QUIT CLAIM DEED	
Date Recorded: 12/12/2005	2005R-503773 934-355

Ownership Updated: 12/1/2020

JAMIE KLIMA	CA
--------------------	----

Billing Address:	Mailing Address:
JAMIE KLIMA 45263 E CABLE LAKE RD CABLE WI 54821	JAMIE KLIMA 45263 E CABLE LAKE RD CABLE WI 54821

Site Address * indicates Private Road

45263 E CABLE LAKE RD	CABLE
-----------------------	-------

Property Assessment Updated: 3/31/2021

2021 Assessment Detail

Code	Acres	Land
G1-RESIDENTIAL	0.930	86,800

2-Year Comparison

	2020	2021	C
Land:	86,800	86,800	
Improved:	77,600	80,300	
Total:	164,400	167,100	

Property History

N/A

Document Number

DECLARATION OF EASEMENTS AND
JOINT MAINTENANCE AGREEMENTS

PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS

2006R-506983

05/31/2006 10:00:02AM

TF EXEMPT #:

RECORDING FEE: 15.00

PAGES: 3

RE: Lots One (1), Two (2), Three (3) and Four (4), Bayfield County Certified Survey Map No. 000568, as recorded in Volume 4 of CSM, Pages 143 - 144 as Document No. 366236, being a parcel of property located in Government Lot One (1), Section One (1), Township Forty-three (43) North, Range Eight (8) West, Town of Cable, Bayfield County, Wisconsin.

This Declaration is entered into this 26 day of May, 2006 by Anne Boguslavsky, hereinafter referred to as Declarant.

WHEREAS Declarant is the owner of the above described real estate, consisting of four lots located on Wiley Lake in Bayfield County, Wisconsin; and

WHEREAS Lots Two (2), Three (3) and Four (4) jointly share and utilize a driveway for ingress and egress from East Cable Lake Road to said lots; and

WHEREAS Lots Two (2), Three (3) and Four (4) share a common septic system which is utilized by improvements located on said lots, the lift station being located upon Lot Three (3) and drain field being located upon Lots Three (3) and Four (4); and

WHEREAS the drain field for the septic system benefiting Lot One (1) is partially located on Lot Two (2); and

Recording Area

Name and Return Address

SAWYER COUNTY ABSTRACT
PO BOX 169
HAYWARD, WI 54843

14300

012108207
Parcel Identification Number (PIN)

WHEREAS Declarant desires to grant easements benefiting and burdening the above described real estate pertaining to the existing joint driveway and septic systems; and

WHEREAS Declarant desires to establish a maintenance agreement pertaining to the joint driveway access and septic system utilized by Lots Two (2), Three (3) and Four (4).

NOW, THEREFORE, the undersigned Declarant hereby declares, establishes and set forth the following declarations and agreements which shall be binding upon the Declarant, her heirs, successors and assigns:

1. A permanent and perpetual easement for ingress and egress is hereby established over and across Lots Three (3) and Four (4), said access easement being for the use and benefit of Lots Two (2), Three (3) and Four (4). The location of said access easement is as presently constructed, and as set forth on the attached Certified Survey Map (Exhibit A). The width of said access easement shall be twenty (20) feet in width.
2. The owners of Lots Two (2), Three (3) and Four (4) are also granted an easement for ingress and egress from East Cable Lake Road to Lots Two (2), Three (3) and Four (4) over and across that certain easement granted to Declarant by James A. Brakken and Sybil L. Brakken over and across a portion of the North 200 feet of Government Lot One (1), Section One (1), Township Forty-three (43) North, Range Eight (8) West.
3. The owners of Lots Two (2), Three (3) and Four (4) shall be jointly responsible for the cost of maintenance and repair of said twenty (20) foot access easement. In the event, however, any lot owner causes damage to said access easement by virtue of construction activity or other activity upon his or her lot, said lot owner shall be solely responsible to repair any damage caused as a result of said construction activity or other activity.
4. The owners of Lots Two (2), Three (3) and Four (4) shall have the joint use of the septic system which services improvements located upon said lots.
5. A perpetual easement to access, repair, maintain and replace said septic system, including any sewer pipes, lines, tanks, lift station and drain field located upon Lots Three (3) and Four (4) are hereby granted and reserved, said easements being for the benefit of the lot owners of Lots Two (2), Three (3) and Four (4).
6. The owners of Lots Two (2) and Four (4) are hereby granted easements to access, repair and maintain any sewer pipes, lines or tanks located upon Lot Three (3) which Lots Two (2) and Four (4) utilize in conjunction with the joint septic system.

V945 P249

7. The owners of Lots Two (2), Three (3) and Four (4) shall be jointly liable for the cost of maintaining, repairing and maintaining all portions of the septic system, including tanks, pipes and lines jointly utilized by all of the parties. The cost of repairing or replacing any tanks, pipes or lines which are for the sole benefit of any particular lot owner shall be that lot owner's responsibility.
8. The owners of Lots Two (2), Three (3) and Four (4) shall consult with one another prior to undertaking any maintenance, repair or replacement of the joint septic system. In the event of an emergency requiring immediate attention, however, any lot owner may proceed with maintenance or repair without prior notice or approval of the other lot owners.
9. Any disturbance to the surface of the property due to maintenance or repair taken hereunder shall be restored to its condition before the disturbance.
10. Lot One (1) is hereby granted an easement to access, repair and maintain the drain field located upon Lot Two (2) pertaining to the septic system utilized by Lot One (1) and for the benefit of Lot One (1). The owner of Lot One (1) shall be solely responsible for the cost of maintenance and repair of said drain field. At the time said drain field fails, said easement shall terminate and the owner of Lot One (1) shall be required to construct any replacement drain field upon Lot One (1). Any disturbance to the surface of the property of Lot Two (2) due to the maintenance and repair taken hereunder shall be restored to its condition before the disturbance by the owner of Lot One (1).
11. In the event the owners of Lots Two (2), Three (3) and Four (4) are unable to agree as to any necessary maintenance, repair or replacement of the joint septic system are unable to agree as to any necessary maintenance or repair pertaining to the joint driveway access, or in the event of any other disagreement between the lot owners pertaining to this Declaration, and in the event the parties are unable to agree after fifteen (15) days notice to the other affected lot owners, said matter shall be resolved by binding arbitration. In the event the lot owners cannot agree on an arbitrator, the Circuit Judge of Bayfield County shall appoint an arbitrator. Arbitration proceedings shall be subject to the provisions of Chapter 788, Wisconsin Statutes.
12. All of the terms and conditions of this agreement, including the benefits and burdens, shall run with the land and shall be binding upon, inure to the benefit of and be enforceable by the owners of the respective lots, their heirs, successors and assigns.
13. This Declaration shall be construed and enforced in accordance with the laws of the State of Wisconsin.

Anne Boguslavsky
Anne Boguslavsky

ACKNOWLEDGMENT

STATE OF WI)
COUNTY OF Bayfield)ss.

Personally came before me this 26th day of May, 2006 the above named Anne Boguslavsky, to me known to be the person who executed the foregoing instrument and acknowledge the same.

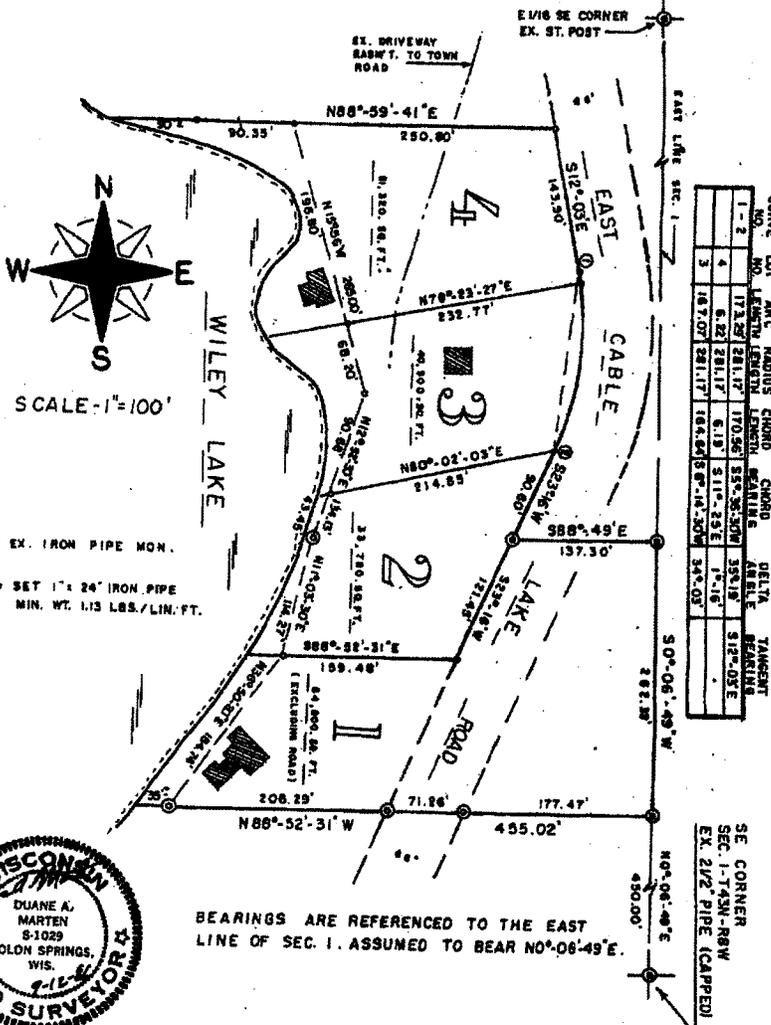
Jojean Lamphear
Notary Public, Bayfield County, WI
My commission: 7-22-07



V945 P250

REGISTER'S OFFICE
 Bayfield County, WIS.
 RECORDED AT 2 P.M.
 ON SEP 17 1886
 W. 4 CSM. 143-174 Ind.
 S.S. Doc. No. 366236
Otto Korpela

BAYFIELD CO. CERTIFIED SURVEY NO. 000568
 LOCATED IN GOV'T. LOT 1, SEC. 1-743N-R6W, TOWN OF CABLE,
 BAYFIELD COUNTY, WISCONSIN.

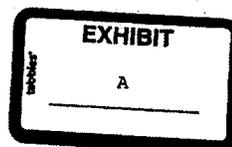


BEARINGS ARE REFERENCED TO THE EAST
 LINE OF SEC. 1. ASSUMED TO BEAR N0°-06'-49" E.

V945 P251

Sheet 1 of 2

143



Tracy Pooler

From: Karl & Cyndi Kastrosky <kastrosky821@gmail.com>
Sent: Wednesday, July 28, 2021 10:38 AM
To: Tracy Pooler
Subject: Fwd: Addition - Klima

As requested.

Karl

----- Forwarded message -----

From: Karl & Cyndi Kastrosky <kastrosky821@gmail.com>
Date: Tue, 27 Jul 2021 at 09:41
Subject: Fwd: Addition - Klima
To: Tracy Pooler <tpooler@bayfieldcounty.org>

----- Forwarded message -----

From: <travelgrl68@aol.com>
Date: Thu, 22 Jul 2021 at 17:58
Subject: Fwd: Addition - Klima
To: kastrosky821@gmail.com <kastrosky821@gmail.com>

Neighbor to the Left

-----Original Message-----

From: Kim Hamilton <kim.m.hamilton@icloud.com>
To: travelgrl68@aol.com
Sent: Thu, Jul 22, 2021 5:25 pm
Subject: Re: Addition - Klima

Hello Suzanne and Jamie,

We are writing to you to acknowledge the receipt of your notice of the possible additional load on the waste water system.

Congratulations on your new addition.

Thanks

Kim and Bob Hamilton

On Jul 22, 2021, at 2:49 PM, travelgrl68@aol.com wrote:

Hello Kim & Bob Hamilton,

We are working on our building permit for a bonus room addition on the back of our house.

However per our maintenance agreement, I am required to notify you as we are adding habitable space to our existing home.

As a county requirement we are to make you aware of the waste water load to our common waste water treatment system.

If you can kindly email back with your acknowledgment I would greatly appreciate it.

Thank you
Jamie & Suzanne Klima

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Karl Kastrosky
Land Development and Zoning Consultant
715-580-0157

Cyndi Kastrosky
Sales Associate Camp David Realty
715-292-3352

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Karl Kastrosky
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Cyndi Kastrosky
Sales Associate Camp David Realty
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Tracy Pooler

From: Karl & Cyndi Kastrosky <kastrosky821@gmail.com>
Sent: Wednesday, July 28, 2021 10:42 AM
To: Tracy Pooler
Subject: Fwd: Klima - Addition

Second neighbor.
Karl

----- Forwarded message -----

From: <travelgrl68@aol.com>
Date: Thu, 22 Jul 2021 at 17:59
Subject: Fwd: Klima - Addition
To: kastrosky821@gmail.com <kastrosky821@gmail.com>

Neighbor to the Right. James West

-----Original Message-----

From: James West <west@jameswest.org>
To: Suzanne (Jamie) Klima <travelgrl68@aol.com>
Sent: Thu, Jul 22, 2021 4:37 pm
Subject: Re: Klima - Addition

Hi Jamie and Suzanne. Notice received. Thanks -Jim

On Thu, Jul 22, 2021 at 2:50 PM <travelgrl68@aol.com> wrote:
Hello Jim West,

We are working on our building permit for a bonus room addition on the back of our house.

However per our maintenance agreement, I am required to notify you as we are adding habitable space to our existing home.

As a county requirement we are to **make you aware of the waste water load** to our common waste water treatment system.

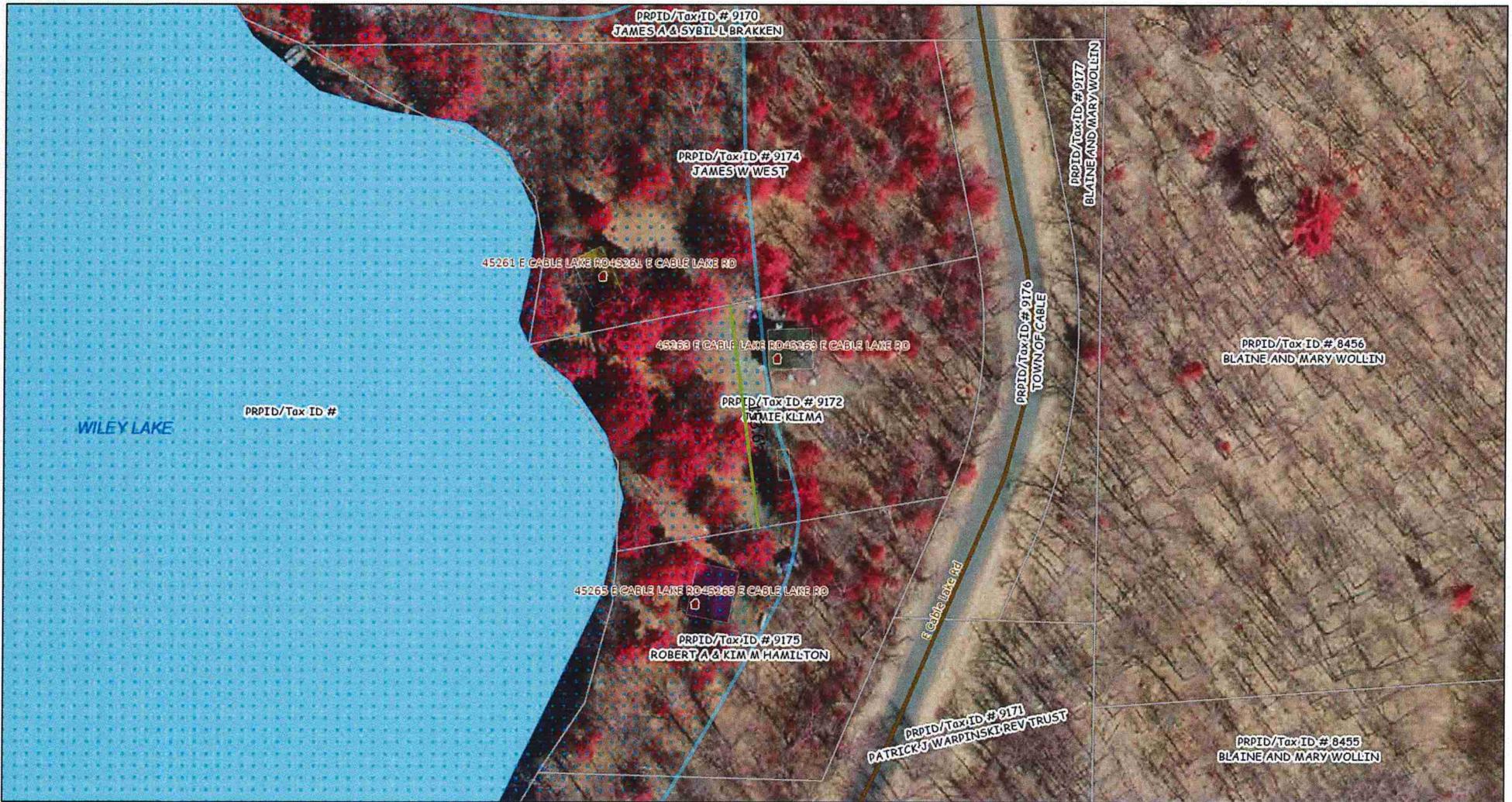
If you can kindly email back with your acknowledgment I would greatly appreciate it.

Thank you
Jamie & Suzanne Klima

--
James West
west@jameswest.org

--
Karl Kastrosky

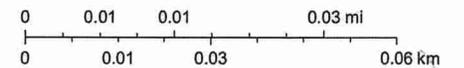
Bayfield County, WI



7/19/2021, 10:54:24 AM

- Wetlands
- Rivers
- Lakes
- Approximate Parcel Boundary
- Road Type
 - Town
- Flood Plain Boundaries Active Dec 16th, 2011
 - A = Areas with a 1% annual chance of flooding and 26% chance of flooding over the life of a 30 yr. mortgage.
 - Building Footprint 2015
 - Building

1:783



Bayfield County, Bayfield County Land Records Department

Today's Date: 7/19/2021

Created On: 3/15/2006 1:15:06 PM

Description Updated: 12/1/2020

Tax ID: 9172
PIN: 04-012-2-43-08-01-4 05-001-90000
 Legacy PIN: 012108208990
 Map ID:
 Municipality: (012) TOWN OF CABLE
 STR: S01 T43N R08W
 Description: LOT 3 CSM #568 IN V.4 P.143 (LOCATED IN GOVT LOT 1) IN V.1124 P.907
 Recorded Acres: 0.930
 Calculated Acres: 0.943
 Lottery Claims: 0
 First Dollar: Yes
 Zoning: (R-1) Residential-1
 ASN: 108

Tax Districts Updated: 3/15/2006

04 STATE
 012 COUNTY
 041491 TOWN OF CABLE
 001700 SCHL-DRUMMOND TECHNICAL COLLEGE

Recorded Documents Updated: 3/15/2006

QUIT CLAIM DEED
 Date Recorded: 5/13/2014 **2014R-554242 1124-907**

WARRANTY DEED
 Date Recorded: 5/31/2006 2006R-506985 945-254

CONVERSION
 Date Recorded: 503773 755-111

QUIT CLAIM DEED
 Date Recorded: 12/12/2005 2005R-503773 934-355

Ownership Updated: 12/1/2020

JAMIE KLIMA CABLE WI

Billing Address: **JAMIE KLIMA**
 45263 E CABLE LAKE RD
 CABLE WI 54821

Mailing Address: **JAMIE KLIMA**
 45263 E CABLE LAKE RD
 CABLE WI 54821

Site Address * indicates Private Road

45263 E CABLE LAKE RD CABLE 54821

Property Assessment Updated: 3/30/2021

2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.930	86,800	80,300

2-Year Comparison

	2020	2021	Change
Land:	86,800	86,800	0.0%
Improved:	77,600	80,300	3.5%
Total:	164,400	167,100	1.6%

Property History

N/A

19-178

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **87495 (11/7/1986)**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0270** Issued To: **Jamie Klima / Karl Kastrosky, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **1** Township **43** N. Range **8** W. Town of **Cable**

Gov't Lot Lot **3** Block Subdivision CSM# **568**

For: **Residential Addition / Alteration: [1 – Story; Great Room (27' x 30') = 810 sq. ft.;
Open Deck (16' x 25') = 400 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as proposed. Get required UDC inspections. Remove "old" impervious and restore to vegetation.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

August 17, 2021

Date